



Ontario

ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND
RELATED MATTERS.

Hearing held
8th floor
180 Dundas Street West
Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange	Commissioner
P.S.A. Lamek, Q.C.	Counsel
E.A. Cronk	Associate Counsel
Thomas Millar	Administrator

Transcript of evidence
for

April 24, 1984

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Hearing held on the 8th Floor,
180 Dundas Street West, Toronto,
Ontario, on Tuesday, the 24th
day of April, 1984.

THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner
THOMAS MILLAR - Administrator
MURRAY R. ELLIOT - Registrar

APPEARANCES:

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L. CECCHETTO)	General and Solicitor General
	of Ontario (Crown Attorneys
	and Coroner's Office)
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I.J. ROLAND)	Sick Children
M. THOMSON)	
R. BATTY)	
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D. YOUNG)	Toronto Police
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	Children
B. SYMES	Counsel for the Registered
	Nurses' Association of Ontario
	and 35 Registered Nurses at
	The Hospital for Sick Children
D. BROWN	Counsel for Susan Nelles -
	Nurse

(Cont'd)...



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APPEARANCES: (Continued)

C. THOMSON, Q.C.) G.R. STRATHY)	Counsel for Phyllis Trayner - Nurse
J.A. OLAH	Counsel for Janet Brownless - R.N.A.
B. KNAZAN	Counsel for Mrs. M. Christie - R.N.A.
S. LABOW	Counsel for Mr. & Mrs. Gosselin, Mr. & Mrs. Gionas, Mr. & Mrs. Inwood, Mr. & Mrs. Turner, Mr. & Mrs. Murphy (parents of deceased children)
F.J. SHANAHAN	Counsel for Mr. & Mrs. Dominic Lombardo (parents of deceased child Stephanie Lombardo); and Heather Dawson (mother of deceased child Amber Dawson)
W.W. TOBIAS) G.R. SOLOMON)	Counsel for Mr. & Mrs. Hines (parents of deceased child Jordan Hines)
J. SHINEHOFT	Counsel for Lorie Pacsai and Kevin Garnet (parents of deceased child Kevin Pacsai)



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A/DM/ak

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3 --- Upon commencing at 10:05 a.m.

4 THE COMMISSIONER: Yes, Mr. Lamek.

5 PHYLLIS TRAYNER, Resumed

6 EXAMINATION BY MR. LAMEK: (Continued)

7 Q. Mrs. Trayner, when we ended on
8 Thursday we had just gone over the events of the
9 night of March 21st-22nd, the night that Justin
10 Cook died. You had told us I think at the end about
11 your having repaired to the Hospital cafeteria for
12 a cup of coffee with Miss Nelles and Mrs. Radojewski.

13 A. Right.

14 Q. With respect to Justin Cook,
15 Mrs. Trayner, on the evidence that we have heard
16 here I think I summarize it correctly that the best
17 pharmacological opinion seems to be that Justin
18 Cook received a large dose of digoxin shortly before
19 he died. That I take it is your understanding of
20 the evidence that we have heard?

21 A. Yes.

22 Q. Now, it is your evidence as I
23 have understood you, that during the times, the two
24 times that you were relieving Miss Nelles for breaks
25 on the night that that child died, you did not leave
his bedside at any time?

A. No, I didn't.



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Q. And other than the midnight

Inderal which was administered by Miss Nelles in your presence, no one to your knowledge gave any medication to that child in your presence?

A. Right.

Q. I have understood your evidence correctly, have I? You will know, I am sure, that Miss Nelles' evidence was that other than for the breaks when she was relieved by you she did not leave the child at all?

A. Right.

Q. And that as with you so with her to the best of her knowledge no one gave the child any medication in her presence?

A. Right.

Q. And it would follow therefore, would it not, Mrs. Trayner, that if Justin Cook received digoxin during any time on that long night shift March 21-22 he received it from you or from Miss Nelles?

A. No.

Q. Well, from whom else could he have received it?

A. My biggest concern is the syringe that was taped to the bedside.



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Q. That may be, but that happened
at 3:45-3:50 in the morning?

4

A. Right.

5

6

Q. Do you have any reason to doubt
the contents of the syringe?

7

8

A. Just that I didn't draw it up.
We didn't tape it there, and we don't know who drew
up the drug.

9

10

11

Q. And so you say because you
don't have that information you have a question in
your mind?

12

A. Right.

13

14

Q. Is that a larger question than
any you might have had about the Inderal in the
fridge?

15

16

A. Yes, because Sui Scott had
signed.

17

18

Q. Because there was a name on
that one?

19

A. Right.

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Q. Now, of course, the material
in the syringe taped to the bed was a difficulty
as far as Justin Cook was concerned, and that of
course would not explain the events prior to his
receiving that material, would it? It wouldn't



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explain that he got into trouble at 3:45?

3

A. No.

4

Q. It could only explain the
5 events that followed?

5

6

A. Right.

7

Q. From 3:45, or 3:50 when the
8 drug was administered until about 4:20 when the
9 arrest was called.

9

A. Right.

10

Q. In the space of that half hour?

11

A. Hm-mm.

12

Q. I suppose it becomes a matter
13 of pharmacological evidence again as to whether that
14 was a sufficient lack of time to account for
15 concentrations of drug that were found in his tissue,
16 and as to that you cannot help us I take it?

16

A. Right.

17

Q. I know Mr. Thomson asked you
18 this question but I am obliged to ask you this again,
19 Mrs. Trayner. Did you administer any medication at
20 all to Justin Cook on the night that he died?

20

21

A. No, I didn't.

22

Q. And other than the possibility
23 of the syringe taped to the bed, to which you have
24 referred, if that child did receive digoxin that
25

24

25



1
2 night do you have any explanation as to how he
3 received it?

4 A. No, I don't.

5 Q. Just before we leave these
6 babies and move to certain other events. I want to
7 go back for a moment to the gentamicin administration
8 to Allana Miller the previous night. You have told
9 us that you went in to Miss Nelles and showed her
10 the vial and the ticket and said you were going to
do the gentamicin.

11 A. Right.

12 Q. Did you give medications for
13 anyone else on the floor that night?

14 A. Maybe for Mrs. Christie, for
15 her patients - and I can't remember --

16 Q. I am sorry?

17 A. I had a patient up until 11
18 o'clock in 418 and I may have given medication to
that baby.

19 Q. You had a patient in 418, and
20 one in 426 until 11 o'clock that night?

21 A. Right.

22 Q. And Mrs. Christie and
23 Miss Brownless after 11 o'clock of course had
24 patients as well?
25



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2

A. Right.

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4

Q. Do you have a recollection of giving medication to their patients that night?

5

6

7

A. No. I can remember the Saturday night, but I can't remember the Friday night.

8

9

10

Q. Do you recall whether on Friday or Saturday night you administered any antibiotic to any child other than Allana Miller on the Friday night?

11

12

13

14

15

16

17

A. No, I can't.

18

19

Q. You cannot? Because I take it if you were concerned on the Friday night to reassure the nurse to whose patients you were going to give even an antibiotic, that you were indeed giving what was prescribed, your concern to do that would have continued on to the Saturday night as well, wouldn't it?

20

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A. Well, Susan and I were the only RNs on the floor.

Q. Yes.

A. So I would have medications checked by another RN.

Q. Yes.

A. But I wouldn't show the



1
2 medication to Mrs. Christie or Janet Brownless.

3 Q. Would you not? Okay. Because
4 that is not their responsibility at all.

5 A. No.

6 Q. And there is no way they could
7 be responsible for whatever was given to the child
8 I take it?

9 A. Right.

10 Q. Now, you helped Miss Nelles on
11 the Saturday morning to complete her charting on
12 Allana Miller, did you not?

13 A. Yes.

14 Q. Because she had been away from
15 Allana Miller so much of the night?

16 A. Yes.

17 Q. Were you aware that in
18 completing her charting on the Saturday morning for
19 Allana Miller, Miss Nelles signed for the 1:00 a.m.
20 gentamicin administered?

21 A. I wasn't aware of that. I
22 can remember telling the police on the Wednesday
23 morning that I had given the medication. Now I am
24 not sure when I knew that Susan had signed for the
25 medication.

Q. But when you were helping her



1
2
3 with her charting on the Saturday morning, you did
4 not then remind her that it was you and not she who
5 had done the 1 o'clock gentamicin?

6 A. I hadn't gone through the whole
7 chart with her, I was just giving her my summary of
8 what had happened to Allana at the time I was there.

9 Q. You didn't remind her that
10 you had done the 1 o'clock gentamicin?

11 A. No, I didn't remind her.

12 Q. But you said you had made
13 such a point of going and showing her that drug to
14 ensure that she knew it was being administered?

15 A. Right.

16 Q. It wouldn't happen twice?

17 A. Right.

18 Q. I am not suggesting this is
19 at all attributable to you or any fault of yours,
20 but she clearly says she didn't remember that she
21 signed for that drug?

22 A. Right.

23 Q. In other words, if that was
24 part of the object of the exercise to impress upon
25 her the drug was being given by you, and she didn't
have to bother about it, it didn't make that much of
an impression apparently that she remembered it the



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following morning, is that a fair inference?

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A. No. I think at the end when you do your charting you just go right through the whole page and she knew that she had given the ampicillin and she knew the gentamicin was given, and I can't say why Susan signed it.

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Q. Of course you can't.

A. But I just know that the chart does go down to medical records.

Q. Yes.

A. And if for one reason or another something is not signed off it will be sent right back up. So I guess Susan knew that the gentamicin had been given, and maybe forgot that I had given it, but she knew the drug had been given so she signed for it.

Q. That was her evidence of course. Is it fair to say, Mrs. Trayner, that in completing her charting on the Monday morning, your going in with that ticket and the syringe and the vial had not so impressed her in the rush of getting the thing done that she remembered that?

A. Well, --

Q. It obviously slipped her mind?

A. Right.



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3 Q. To that extent your effort into
4 going into Room 418 with that syringe, with that
5 vial, with that ticket failed to achieve the very
6 proper purpose that you had in mind?

7 A. The purpose was that the drug
8 would not be given again.

9 Q. Okay.

10 A. I think that was impressed
11 upon her because it wasn't given again.

12 Q. And as to the other purpose,
13 that is to say in light of the concern about the
14 Pacsai incident and the likely inquest, and the
15 desire to reassure Miss Nelles that the child was
16 indeed receiving what had been prescribed for him,
17 that was another part of your intention, wasn't it?

18 A. A small part.

19 Q. Yes. If in fact the drug
20 was drawn up by the time you got into the room,
21 that aspect of your objective also wasn't achieved,
22 was it?

23 A. I can't recall whether I
24 drew it up there at the bedside or at the room.

25 Q. No, I know you can't, and
since you cannot recall I take it you cannot dispute
Miss Nelles' recollection that the drug was already
drawn up when you went in?

A. No, I can't.



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Q. So in terms of reassurance
that the right drug was being administered, it may
be that no such reassurance was possible if the
drug was drawn up ahead of time; is that fair?

A. I knew what I was giving.

Q. You knew, but she didn't
know, and the object was to reassure her, wasn't it?

A. The object was to make sure
that there would be no confusion that that medication
for one o'clock was going to be given.

Q. That is right, and it was
also part of your objective to reassure her in light
of the concern generated by the Pacsai incident that
her patient was going to get what was prescribed?

A. Okay.

Q. And to that extent if the
drug was drawn before she ever saw the syringe, she
could have no such reassurance? Is that fair?

A. Okay.

Q. All right. At least she knew
the drug had been given, although she apparently did
not recall it was you who had given it and not she.

Let's look at the immediate after-
math of Cook's death. You were to work on the Sunday
night, were you not?



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A. I was supposed to work --

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Q. Yes.

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A. -- on the Sunday night.

5

Q. And at some point on Sunday,

6

as I understand it, you received the word that you
were to stay home on Sunday night; not come in to work?

7

A. Right.

8

Q. You were given the night off

9

with pay?

10

A. Right.

11

Q. When and from whom did you

12

learn that?

13

A. Janet Brownless had called me,

14

I think it was around five o'clock in the evening.

15

Q. Yes.

16

A. Five o'clock in the afternoon

17

and asked me if I had been off or has Liz Radojewski

18

called and I said no. She said, well, Liz had just

19

called her and told her to take the night off and I

20

said, well, that was nice. She said I wonder if you

21

are getting it off, and I said I haven't heard from

22

Liz at all.

23

So shortly after that, I thought it

24

was about 5:30, Mrs. Radojewski had called me and had

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told me that we have the night off and I had asked her



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about the other girls on my team and she assured me that everybody had the night off with pay.

Q. Can we just go back to the call from Janet Brownless. Janet Brownless told you that she had heard from Liz Radojewski, who had told her to take the night off.

A. Right.

Q. And you said that's nice.

A. Hm-mmm.

Q. Did she tell you whether Mrs. Radojewski had given any reason for that "niceness"?

A. She just said that the nursing supervisor, Mrs. Geiger, had thought she had -- was under enough stress because of Justin Cook dying and --

Q. That she, Janet Brownless, was under enough stress?

A. Yes.

Q. Yes?

A. And that they were going to give her the night off with pay.

Q. All right.

A. Just to relax.

Q. Had Janet Brownless, to your recollection, had any particular involvement with the Cook child? I know she had patients in the same room.



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A. Hm-mm. No, she didn't have any direct involvement.

Q. Did it strike you as odd that Miss Geiger - that's the top of the nursing establishment of the Hospital, isn't it?

A. Hm-mm.

Q. - should be so concerned about Miss Brownless and her stress that she would give her the night off? Did that puzzle you at all? Did you think that odd?

A. Well, a little bit, but she thought that Elizabeth was trying to call me, Mrs. Radojewski.

Q. Right.

A. And I hadn't heard from Liz so I wasn't sure if Janet had mistaken what Liz was saying --

Q. Okay.

A. -- or if she was indeed going to call me.

Q. Now, when Mrs. Radojewski called you, did she give you the same reason for your having the night off?

A. Hm-mm.

Q. The events of the night before



1
B5 2 and the stress and the strain of that?
3 A. Yes.
4 Q. That was related solely, was
5 it, to the previous long night shift?
6 A. That is what she had said.
7 Q. All right. What was your
8 response to that, either expressed or not expressed?
9 A. I was surprised.
10 Q. What surprised you?
11 A. The Hospital had never done
12 that before, and I thought it was surprising that
13 they -- I could understand them giving us the night
14 off. What was surprising was that the Hospital was
15 willing to pay us and pay other people to come in and
16 do our shift.
17 Q. Did you feel that the events
18 of the night before had been so stressful that you
19 should have the night off?
20 A. Well, it was an unusual night,
21 Saturday night, and we had been under a lot of stress
22 the weeks before that with --
23 Q. Yes.
24 A. -- several of the babies
25 dying.
Q. What caused the stress the



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night before particularly? Was it the death of the child or the other unusual events that occurred during the shift and the puzzlement you had felt as a result of all those things?

A. Probably the whole night, and in particular, you know, Justin's death.

Q. Well, certainly there had been many other nights, particularly in March, when children had died.

A. Hm-mm.

Q. I take it that all deaths are pretty well equally upsetting, are they not?

A. Right.

Q. And it may be that you had felt the need for a night off following some of those other deaths, had you?

A. Right.

Q. This time there had been other events, and did those other events serve to increase the stress and strain that you were feeling? The other events, like the locking up of the digoxin, the drawing of the post mortem blood, the apparent concern of Dr. Fowler on the floor? Had those things served to heighten the strain that you were feeling?

A. Oh, I think they did, yes.



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Q. Because you didn't know what
was going on?

A. Right.

Q. And you were concerned about
what was going on?

A. Yes.

Q. And you hadn't got any
answers?

A. Right.

Q. When Mrs. Radojewski spoke to
you, did she have any of the answers that you had not
been able to get the night before?

A. No, not that Sunday evening.

Q. About what time of day did
she call you?

A. It was about 5:30 I thought.

Q. On Saturday night, you told
us you were prepared to wait for that pink memo on
Sunday --

A. Hm-mm..

Q. -- that Dr. Costigan had
promised you would be coming around and it would serve
to clarify some of the puzzling things that had been
going on.

A. Right.



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Q. Did you ask Mrs. Radojewski whether that memo had been circulated yet?

A. No, I didn't.

Q. Did she offer any information as to whether any explanation had been given for any of the events of the night before?

A. No. I hadn't asked her and she hadn't volunteered any information.

Q. And you did not ask?

A. No.

Q. Were you not still curious as to why all those events had occurred on the Saturday night?

A. Well, Liz Radojewski was there; she was the head nurse. I knew she was going to be there Sunday and she would be able to sort everything out. She didn't seem to be overly concerned on Sunday night when she had called. It was more of, the Hospital is giving you a night off; go out to dinner with your husband, have a good time and just relax, and the whole team was off.

Q. Mrs. Trayner, forgive me, I don't know what it is like to work nights. You get home at what, eight o'clock in the morning, 8:30, something like that?



B9

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A. Hm-mm...

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Q. You have had an exhausting,
upsetting night. I take it you slept for a while?

5

A. I slept all day.

6

Q. Okay. Until -- were you
awakened by Mrs. Radojewski's call?

7

A. By Janet Brownless' call.

8

9

Q. All right. And what time was
that?

10

A. About 5:00.

11

12

Q. And you did not go back to
sleep between that call and Mrs. Radojewski's call?

13

A. No. I had to get up at that
time anyway.

14

15

16

Q. Okay. So at five o'clock in
the afternoon, you have now got another unusual fact,
have you not?

17

A. Hm-mm...

18

19

20

Q. And you have now got the
Hospital giving Janet Brownless a night off with pay
and maybe you are going to get the night off; you
don't know?

21

A. Right.

22

23

Q. And that is, if you like, a
sixth unusual fact flowing from the preceding evening?

24

25

A.



B10

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A. Hm-mm.

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Q. We went through five last

4

time, you remember?

5

A. Hm-mm.

6

Q. Now here is another one. Were

7

you not puzzled as to what was happening and what was
going on?

8

A. Actually. I just thought that

9

the Hospital had realized that our team was under a

10

great deal of stress and that this was their way of

11

saying. we appreciate you and we would like you to

12

take some time off.

13

Q. Except, of course, from Miss

14

Brownless' call you didn't know that that was the

15

Hospital's attitude to your whole team, did you?

16

A. No. She wasn't sure at all.

17

Q. All you knew was that

18

certainly Miss Brownless was getting the night off.

19

Did you infer that the team was going to get the whole
night off? Was that an assumption you made?

20

A. No, I hadn't made that

21

assumption.

22

Q. Therefore, the "niceness" of

23

the Hospital to the team couldn't at that stage have

24

served to alleviate any questions you had in your

25



B11 2 mind? Is that fair?

3 A. Okay.

4 Q. All right. So we then have
5 a sixth unusual event, and I ask you again, were you
6 puzzled and concerned that this was yet another
7 apparently unexplained event: why Janet Brownless?
8 Didn't you ask that question of yourself?

8 A. No.

9 Q. Okay. I take it when you
10 were awakened at five o'clock and you had that chat
11 with Janet Brownless on the telephone, from then until
12 Mrs. Radojewski called, you must have gone over the
13 events of the night before in your mind?

13 A. ~~Hm-mm-mm.~~

14 Q. Because they had been very
15 puzzling events, hadn't they?

16 A. Well, yes, they had.

17 Q. They had been rather troubling
18 events, hadn't they?

19 A. They were surprising and out
20 of the ordinary.

21 Q. And you didn't know what was
22 going on?

22 A. No, I didn't know.

23 Q. There was clearly something
24
25



1
B12 2 going on, though, wasn't there?

3 A. Yes, there was.

4 Q. When Mrs. Radojewski called,
5 you did not say to her, "Hey, Liz, have we got any
6 answers yet? What has happened?" You didn't ask
7 her that?

8 A. No, I didn't.

9 Q. Now did Mrs. Radojewski tell
10 you that it was the whole team that was being given
11 the night off with pay?

12 A. I had asked -- she had told
13 me that I was off --

14 Q. Yes.

15 A. -- due to the stress, and I
16 knew Janet Brownless was off, so I had asked, is
17 Susan getting the night off?

18 Q. Yes?

19 A. She said, yes, and is Mrs.
20 Christie getting the night off, and she said yes, and
21 I said, oh. She said the whole team, you are all
22 being paid, and stay home.

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Q. All right. Even knowing that you now knew from Mrs. Radojewski what you had not known from Miss Brownless, that is to say, the whole team was being given the night off with pay, at that stage you could obviously say well, that's nice, the Hospital is doing something nice for us.

8

A. Hm-mm.

9

10

Q. But that still didn't serve to explain the unusual events of the night before, did it?

11

A. No.

12

13

14

Q. Did you continue through Sunday evening to turn over those events in your mind to see if you could find some explanation for those events?

15

16

A. No, I didn't.

17

18

Q. Did you speak to anyone else from the Hospital that Sunday, late afternoon or early evening?

19

20

A. I can't remember if I called Bertha or not, Mrs. Bell, that day after I had spoken to Liz or not.

21

22

Q. Well, did Mrs. Radojewski tell you whether the 4B team was going to be working?

23

24

A. I had asked her if Bertha Bell's

25



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team was off.

3

Q. Yes.

4

A. And she had said no, just your

5

team.

6

Q. All right. Had you thought that

7

Mrs. Bell's team might also be given the night off?

8

A. I thought if we were under

9

stress then 4B was under as much stress as we were.

10

Q. That was your perception of it?

11

A. Yes.

12

Q. The people on the other side

13

of the floor were feeling the strain every bit as
much as you were?

14

A. Right.

15

Q. Were you therefore surprised

16

when you were told, no, Mrs. Bell's team was not
being given the night off?

17

A. Hm-mm.

18

Q. Did that give you any cause

19

to question the explanation that was given to you

20

that you were being given the night off because of
the strain of the night before?

21

A. Well, I haven't asked her why

22

not Bertha Bell's team.

23

Q. Yes.

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A. And it was that Justin Cook was on our side and he died on our floor.

Q. And the suggestion was that although you might have felt the 4B team was equally stressed the nursing administration apparently didn't?

A. Right.

Q. And that was the inference that you took from that?

A. Hm-mm.

Q. Okay. Did you contact anyone on your own team that evening?

A. No, I don't think I did.

Q. In the course of the conversation with Mrs. Radojewski did she tell you, did she say anything about a meeting to be held on the Monday?

A. No.

Q. Now, you were not supposed to be working on the Monday or the Tuesday?

A. No, I was scheduled off.

Q. That's right. You were scheduled next to work long days starting Wednesday the 25th?

A. Right.

Q. Okay. Now, let me be sure then.



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On the Sunday starting at about 5 o'clock there was a call from Brownless followed by a call from Radojewski and you do not recall whether you spoke to Bertha Bell that day?

A. I can't recall, no.

Q. But you spoke to no one else from your own team other than Miss Brownless who called you. Did you have any contact with anyone else from the Hospital that day?

A. I spoke to Bertha but I can't remember when it was, whether it was the Monday after that or not or if it was the Sunday afternoon after Liz had called me.

Q. All right. Whenever it was, what was the content of that conversation. Did she call you or did you call her?

A. I think I called her. It must have been on the Sunday after Liz had phoned me because I think I phoned her and told her that Liz Radojewski had just called and said I had the night off.

Q. Yes.

A. The whole team had the night off and she had said that nobody had called her and that she was still going in to work.



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Q. And she sounded all upset that your team was being given the night off and she hadn't heard if hers was.

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A. I think she was surprised but I think she was also glad that somebody was getting a little break.

8

9

Q. Did it seem to you that she shared your view that the 4B team was under every bit as much stress as the 4A team?

10

11

A. I think so, yes.

12

13

Q. All right. So, you have the night off on Monday, and I have no doubt that was a very welcome night off?

14

A. Hm-mm.

15

16

Q. Did you receive any telephone calls or any other contact from anyone at the Hospital on Monday?

17

A. Yes, I did.

18

19

Q. From who?

A. Liz Radojewski.

20

Q. What time was this?

21

A. It was early in the morning, about 9 o'clock in the morning.

22

23

Q. A telephone call?

24

A. Yes.

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Q. Yes. And what did she say to
you?

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A. She was very upset on the
phone, she was crying.

6

Q. Yes.

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A. And she had told me that she
didn't know what was going on on our floor. She
then told me what had happened from the Sunday with
supervisors being on the floor, with the supervisors
taking away the narcotic keys, about patients being
transferred off the floor. She wasn't scheduled to
work I don't think on the Monday but she had told
me that she was going to go down to the Hospital to
see if she could find out some answers and had also
told me that she was planning on going to the RNAO
Association to find out what rights she had or that
we had on the floor.

17

18

19

Q. When Mrs. Radojewski had called
you on the Sunday, do you know where she was calling
you from?

20

21

A. No, I don't. I assumed it was
from the Hospital.

22

23

Q. Now, you told us that she had
been on call on the Sunday at the Hospital?

24

25

A. Right.



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Q. And certainly she had been
in to the Hospital earlier in the morning.

4

A. Right.

5

6

Q. Because you had saw her there
as you were going off the shift?

7

A. Hm-mm.

8

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Q. In the course of the conversa-
tion you had with her at about 5:30 did you get any
information as to whether she had been in the
Hospital for any period of time at all on the Sunday?

11

12

A. Well, I knew that she was
scheduled to work from 7:30 to 3:30.

13

Q. She had to be there, had she?

14

A. Yes.

15

Q. I'm sorry, I misunderstood you.

16

A. Oh, I'm sorry.

17

Q. By on call I thought she had
to be available to go if required.

18

19

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21

A. No, she was the weekend
supervisor. She had worked on the Saturday and
the Sunday, so, I knew that she was going to be there
from at least 7:15 on until about 3:30.

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Q. Okay. And when she called you
on the Monday morning and told you of these upsetting
events, and I call them upsetting because you say



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she was upset.

3

A. Hm-mm.

4

Q. Did she tell you when they

5

had started to occur?

6

A. She told me it was on the

7

Sunday.

8

Q. But she had not mentioned

9

anything of that to you on the Sunday afternoon when
she had called you?

10

A. No, she didn't.

11

Q. Did you say to her, why didn't

12

you mention this yesterday when you called me?

13

A. No. She was really upset,

14

there was no use in questioning her now.

15

Q. All right. And how were you,

16

were you upset when you heard those things?

17

A. Yes, especially if the head

18

nurse was upset.

19

Q. Okay. Is there any one thing

20

in particular that upset you or was it the whole
development that bothered you?

21

A. I think it was the whole

22

development but it was, Liz was very upset and she

23

was very concerned and, you know, she was thinking of

24

going down to see the RNAO to find out what rights,

25



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could the supervisors take away our keys, did we have rights, could we take them back or whatever and she seemed to be very concerned.

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Q. Well, I can understand that you were concerned that she was concerned.

7

A. Yes.

8

9

10

Q. But did you not have some independent concern of your own? I mean, this after all was yet another surprising and unexplained development, wasn't it?

11

A. Hm-mm, yes.

12

13

14

15

Q. Coming on top of the events of the Friday night and the Sunday evening, now you learn of yet more surprising things happening. Did you now have any concern of your own, whether she was upset or not?

16

A. Yes.

17

Q. And what was your concern?

18

19

A. Well, I just thought that there was something going on at the Hospital.

20

Q. All right.

21

22

A. Something that they hadn't bothered to tell the head nurse about either.

23

24

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Q. Did it occur to you that it might be something that they had avoided telling



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her about?

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Q. And that in itself must have been extremely bothering, wasn't it?

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A. Yes.

Q. It was not just you as team leader who had been kept in the dark but now apparently the acting supervisor for Sunday, the head nurse --

17

18

A. Right.

Q. -- didn't know what was going on as well.

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Q. That went beyond the question of right, and who was allowed to carry the keys, didn't it?

A. Right.

Q. It is not just a jurisdictional question you were concerned about, who had the right to carry the keys. You were concerned about what on earth was going on on that ward, weren't you?

A. Yes.

Q. What did you think was going on?

A. I had no idea. My own feeling was that the hospital was doing something, an investigation, or looking at policies, or procedures, I don't know, but the hospital was involved in it.

Q. Did Mrs. Radojewski tell you whether the supervisors were on 4B, or were they just on 4A?

A. No, she told me they were on 4, 4A and 4B.

Q. Now clearly the hospital was doing something, something was happening there. What did you think they were looking at, did nothing cross your mind?

A. No, nothing in particular.

Q. You must have been thrashing about



1
2 for an answer though?

3 A. Well Liz Radojewski had told me
4 that she was going down to the hospital and she was
5 going to find out what she could, and she would call
6 me back.

7 Q. And you were content to wait
8 until you heard back from her, there was not much else
9 you could do I guess?

10 A. Right.

11 Q. Except sit and worry about it?

12 A. Well I don't know if I - it was
13 on my mind but I was the team leader and Liz was the
14 head nurse, and it was her floor and she was going to
15 look into it and I would wait back, or wait for her to
16 phone back and tell me what had happened.

17 Q. Okay. And Saturday night you had
18 been told there would be a memo around explaining
19 things and you were prepared to wait for that?

20 A. Right.

21 Q. And then on Sunday no explanation
22 seemed to be forthcoming, so you didn't raise the
23 question, is that fair?

24 A. Well I hadn't asked about it.

25 Q. You hadn't asked. On Monday you
learn of more disturbing things, and Mrs. Radojewski



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2 is going to look into it and you are going to wait to
3 hear more from her?

4 A. She was going to call back in a
5 couple of hours, so there wasn't much more for me to
6 do.

7 Q. Wasn't your mind seething with
8 questions as to what was going on?

9 A. I really thought it was something
10 to do with the hospital.

11 Q. That was clear?

12 A. Yes.

13 Q. But what to do with the hospital?

14 A. I had no idea.

15 Q. And nothing occurred to you, you
16 had no thoughts, no possible explanation no matter how
17 farfetched they may have been, nothing crossed your
18 mind?

19 A. Only that the hospital was
20 concerned because they were transferring new
21 admissions off our floor.

22 Q. That I take it was a matter of
23 great concern to you as well, wasn't it?

24 A. Hm-mm.

25 Q. What did that suggest to you, if
anything?



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A. That there was an investigation,
and I don't know anything more than that.

Q. And you could find no possible
subject matter of that investigation in your own mind?

A. No.

Q. Did it not occur to you in the
course of all that speculation and wondering and worry
and concern to say, could this have something to do
with all those deaths we have been having, that did not
occur to you?

A. No, it didn't.

Q. Although you had had a lot of
deaths in March, did you not?

A. Yes, we had.

Q. One of them you knew was likely to
be the subject matter of an inquest?

A. Right.

Q. Pacsai?

A. Yes.

Q. And one of them, the most recent,
had been a death in which unusual things had happened,
post mortem blood had been taken and so on?

A. Right.

Q. It did not occur to you to wonder
whether these activities at the hospital might have



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something to do with the deaths that had occurred?

A. No, it didn't.

Q. Did Mrs. Radojewski call you
back?

A. Yes, she did.

Q. Between her two calls did you
speak to anyone else from the hospital?

A. Yes, I did.

Q. To whom?

A. Marie Mandal had called.

Q. She called you?

A. Yes.

Q. What time was that please?

A. That was around - that was early
in the morning too.

Q. It was after Mrs. Radojewski
called?

A. Yes, 9:30 - 10 o'clock.

Q. And what did she say to you?

A. She was quite upset. She had been
working the Sunday and she was - she seemed to be very
concerned and had sounded that she wanted to talk to
somebody, or be with somebody. She was recounting all
these events that had happened on the Sunday afternoon,
and how lost she had felt on the floor. How she



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couldn't get in touch with Liz Radojewski, and she knew that she was working. How shocked she was when the supervisor had come up and taken the narcotic keys away from her. How upset she was that the children were being admitted and then being turned around and looking for other bed space in the hospital.

Q. Yes?

A. And she felt very overwhelmed and very lost.

Q. Marie Mandal had worked the long day shift on the Sunday, on 4A?

A. Right.

Q. As team leader?

A. Right.

Q. And she recounted all these things to you and her responses to them, and the upset and concern that she felt?

A. Yes.

Q. What did you say?

A. I said that Liz had called me about half an hour and she was also upset but she was going down to the hospital to try and find out what was going on, and that she would be calling me back.

Q. Did Miss Mandal's call serve to increase the concern that you were feeling?



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A. Well I was concerned. I don't know if I was as concerned as Marie was because I wasn't there on the Sunday. Now being there and hearing about it are two different things, I think there is a very different level of anxiety that would come about.

Q. Did Miss Mandal call you from the hospital?

A. No, she called me from her apartment.

Q. She was scheduled to work the long day on the Tuesday, not on the Monday as I understand it, or so it appears from the WIN sheet anyway?

A. Okay.

Q. So she was only able to recount to you the events of Sunday, she didn't know what was happening on the floor on Monday?

A. Right.

Q. You did not understand that she had been in touch with the hospital that morning before she called you?

A. No.

Q. You had no knowledge, and I have no knowledge I might tell you. She didn't mention that she had, or anything of that sort?



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A. No.

Q. All right, you have now received two calls from two very upset people, Mrs. Radojewski and Miss Mandal.

A. Right.

Q. And it is only about 9:30 in the morning, what next happened?

A. I had told Marie that Liz was going to call me back and I had asked her if she was alone, and she said "yes". I said if she wanted to she could come over to my place instead of sitting at home being alone. She was agreeable to that and said that she had to call a couple of the other girls as well, she wanted to phone the girls on her team to see how they were, and had asked if they wanted to come over, could we all come over, I said "sure".

Q. She said she wanted to phone the girls on her team to see how they were? Did you then wait for Mrs. Radojewski's call?

A. Well Marie Mandal had come over shortly after. I thought - she and Meredith Frise I think and Mary Cooney arrived at 11:00 or 11:30.

Q. And were they there when Mrs. Radojewski called back?

A. Yes, they were.



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2 Q. So in the approximately an hour
3 and a half between Miss Mandal's call to you and her
4 arrival with other members of the nursing staff, what
5 did you do?

6 A. I had my breakfast.

7 Q. Did you contact any of the members
8 of your own team?

9 A. Janet Brownless was at my house,
10 I can't remember if I called her then, or if I had
11 waited until Marie Mandal and the other girls had come
12 over, or if she was called by Mary Cooney.

13 Q. Do you have any information as to
14 whether Miss Nelles, Mrs. Christie, Mrs. Scott knew
15 of the events that occurred on the ward?

16 A. No, I didn't.

17 Q. You did not call them to let them
18 know?

19 A. Uh-uh.

20 Q. Any particular reason for that,
21 did you think of calling them and decide not to?

22 A. Well I really had nothing to tell
23 them and I thought that - I didn't want to upset them
24 with what was going on on the floor that I really
25 didn't know, and I thought it would be better if I
waited for Liz to call and I had something concrete to



1
2 tell them and I would give them a call and let them
3 know.

4 Q. When Miss Mandal, Meredith Frise
5 and Mary Cooney, I think you said --

6 A. Hm-mm.

7 Q. -- and Miss Brownless.

8 A. Yes.

9 Q. When they arrived, that would be
10 between what, 11:30 and 12:00, something of that sort?
11 What did you do, did you sit and talk about these
12 events waiting for Radojewski's call?

13 A. Yes. Marie Mandal was just telling
14 us again, or telling me again what had happened on the
15 Sunday.

16 Q. And she continued to be upset about
17 all those events?

18 A. Hm-mm.

19 Q. What about the others there, were
20 they also upset, puzzled and confused?

21 A. Yes.

22 Q. And you?

23 A. Yes.

24 Q. Did none of the four of you
25 venture any explanation as to what had been going on?

A. No, we didn't, not that I can



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recall.

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Q. Then Mrs. Radojewski called?

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A. Yes.

5

Q. What did she tell you?

6

A. She sounded much better. She had said that she was down at the hospital and felt much better about what was going on on the floor, and that either she had contacted the RNAO or had a meeting to go to the RNAO the next day. She clearly felt much better and said that if I - I had told her that the girls were over at my house, and she said that Mary Costello, the other head nurse, and her thought of having a get together that night and if we wanted to come over around 6:30 or 7:00 and to contact - if I could contact some of the girls from the nursing staff. She gave me some girls to phone and she would do the rest of the contacting, and to come on over around 6:30-7:00 and we will sit around and talk.

18

Q. Did she tell you what it was that made her feel much better?

19

20

A. Just that she had spoken to - either to the hospital administrators or to Mrs. Geiger and she felt better, that she wasn't as confused any more, that is how I took it. That obviously they had explained to her that the supervisors were on the

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floor and they were going to be there.

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Q. She didn't have to have that explained, she knew they were on the floor?

5

A. Yes.

6

Q. Did she tell you what she had learned that made her feel better?

7

A. Not really, not on the phone.

8

Q. Did you ask?

9

10

A. No. I was pleased that she was much better.

11

12

Q. It didn't answer any of your questions though, did it?

13

14

A. No, but if it answered Liz's, Liz Radojewski's questions then we were all, you know, fine.

15

16

Q. And you would wait to find out in due course what the good news was?

17

A. Yes.

18

19

20

Q. And it was in the second telephone call that Mrs. Radojewski invited you to a meeting at her house that evening?

21

A. Yes.

22

23

Q. Was that the first time you had heard of such a meeting?

24

A. Yes.

25



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Q. And the call was what, about what time?

4

5

A. Some time in the afternoon, maybe around 3 o'clock.

6

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8

9

Q. Now having then heard that Mrs. Radojewski was feeling much better, and taking from that such comfort as you did, did you then call the members of your team to say, look you are going to be hearing about these things, not to worry?

10

11

12

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14

A. I called the people that Liz had given me to call. I can't remember who I called, Mrs. Christie was one of them, but she was unable to make it that night I think, so I just told her there was going to be a meeting. I called Sui Scott.

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Q. What did you say to her?

A. I had just told her there was going to be a meeting at Liz's house and Mary Costello and her were going to explain what was going on on the floor.

Q. Did you not explain what you understood was going on on the floor?

A. Sui knew what had happened I think, was she not working on the Sunday?

Q. She worked on the Sunday, that's right, okay.



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A. She would have known.

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Q. Yes.

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A. So I was just being sure to tell her that Liz was going to clarify everything.

6

7

Q. And was Miss Nelles on your list of people to call?

8

9

A. No. Liz made a point of saying that she would call Susan.

10

11

Q. And you did not speak to Miss Nelles on the Monday prior to arriving at the meeting?

12

13

A. I don't think so, no.

14

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Q. You had not spoken to her on the Sunday?

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A. Mary Jean Halpenny.

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Q. Yes. What time did she
arrive?

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A. She was after that first
bunch, so one o'clock.

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Q. Before the Radojewski second
call?

7

A. Right.

8

Q. All right. Anyone else?

9

A. I think that was all.

10

11

12

13

Q. Okay. Were you in touch with
anybody else by telephone from the Hospital other
than, as you have told me, Mrs. Radojewski and the call
you had from Marie Mandal in the morning and perhaps
from Brownless?

14

A. On the Monday or the Sunday?

15

16

Q. On the Monday. And the
people you called to tell of the meeting.

17

A. No, that's all.

18

19

Q. That is the extent of your
Hospital contacts on the Monday?

20

A. Right.

21

22

Q. What were the half dozen of
you, four, five, six of you doing before going off
to Mrs. Radojewski's house?

23

24

25

A. We had ordered a pizza and we



E2 2 had some wine.

3 Q. Okay. Were you talking about
4 the events at the Hospital?

5 A. To the best that I can
6 remember, I think Mary Jean Halpenny was off for a
7 couple of days and when she arrived, Marie Mandal
8 was filling her in on what had happened.

9 Q. Yes?

10 A. What was going on, and I think
11 that was about the extent of it. And then we went
12 on to something else.

13 Q. Okay. You were all content
14 to wait and see what Mrs. Radojewski had to say?

15 A. Hm-mm.

16 Q. And you went off to her house?

17 A. Right.

18 Q. At what time? About 6:30 in
19 the evening?

20 A. Right.

21 Q. And we have heard of the
22 people who were there. Can you give us -- we have
23 heard that there was discussion of the Pacsai case --

24 A. Hm-mm.

25 Q. -- at that meeting. Can you
tell us, please, your best recollection of what was



1
E3 2 said about the Pacsai matter at that meeting?

3 A. I can remember Susan saying
4 that she is sure that she gave the right amount of
5 digoxin to Pacsai, Baby Pacsai; that she used a
6 tuberculin syringe, that she was talking to Mary Jean
7 Halpenny and she said, don't you remember me checking
8 it with you, and Mary Jean saying, yes, and she
9 said, well, I'm sure I gave him the right amount.

10 Q. Were they the only two who
11 mentioned the Pacsai incident?

12 A. I think that was about all.
13 There may have been a comment by Susan as well that
14 she hoped that they would still check out McMaster
15 Hospital --

16 Q. All right.

17 A. -- for the inquest, but that's
18 about all I can remember from that, about that.

19 Q. All right. Do you recall
20 any discussion about deaths other than Pacsai's, whether
21 individual deaths or deaths generally on the ward?

22 A. No. Justin Cook we talked
23 a little bit about.

24 Q. All right. What was said
25 about Justin Cook?

A. Actually it was more about



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what had happened that night.

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Q. All right.

4

A. About digoxin being locked up, being counted for, Dr. Fowler being there and about the biochemist coming in, you know, at 5:30 in the morning.

7

8

Q. All the things for which you had now waited 36 hours for an explanation?

9

A. Hm-mm.

10

11

Q. What explanation did you receive?

12

13

A. I don't really think we got an explanation for it. That there was an investigation going on.

14

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16

Q. Into what?

A. We weren't told that. It was a Hospital thing.

17

18

19

Q. Well, there was clearly some kind of investigation going on and it was clearly a Hospital thing?

20

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22

A. Hm-mm.

Q. Did you or, in your hearing, did anybody else say, "Well, great, but what are they investigating?"

23

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25

A. No. The feeling was that,



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well, good, at least they are doing something.

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Q. About what? How could you feel good if you don't know what they are doing something about?

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A. I can't,--unless it was that at least now they are investigating why the children died, I don't know. I can't --

8

9

Q. Was there some discussion as to the children who had died?

10

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A. I can't remember if there was discussion about children dying. I know that we talked about Baby Pacsai. And I know that Justin Cook came up. Now, I don't remember us talking about, you know, all the children or a collective amount of the children.

15

Q. All right.

16

A. Those two I remember.

17

18

19

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Q. Even though you cannot remember discussion of other children, whether by name or by group, did the thought occur to you that the investigation might have something to do with the children who had died?

21

A. I don't think so.

22

23

Q. Are you telling me you don't now recall?

24

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A. Yes.

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Q. You recall no reference by

4

anyone else to the children who had died and the

5

possible connection with the events that were

6

evidently going on at the Hospital?

7

A. No. I really can't remember

anybody making that connection.

8

Q. As far as you were concerned

9

then there was clearly an investigation of sorts

10

going on?

11

A. Hm-mm..

12

Q. Into what, you knew not?

13

A. Well, we knew that -- I had

14

thought there was one going on for Kevin Pacsai,

which was the Coroner's inquest.

15

Q. Yes.

16

A. And the one that went on or

17

had started after Justin Cook had died.

18

Q. All right. Did you regard

19

that as an investigation into Justin Cook's death?

20

A. Maybe, yes.

21

Q. You say, maybe. Did you

think that?

22

A. Well, I thought they were

23

looking at something because they had done -- they had

24

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taken samples so I thought they were looking after
Justin Cook.

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Q. Did it occur to you to wonder
why they would be looking into Justin Cook's death?

5

6

A. No.

7

Q. For reasons of their own
which were not disclosed to you, they evidently were?

8

A. Right.

9

10

Q. Was that the impression that
you had? So really if I understand you, you were
no further ahead at the end of the meeting at Liz
Radojewski's house as to an explanation for all those
events of the Saturday night and the Sunday, were you?

11

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A. Not really, but Liz and Mary
felt better and I left that meeting with the impression
that everything was fine and that Liz and Mary were
on top of the situation and they weren't concerned,
so we wouldn't be concerned.

15

16

17

18

Q. You felt better because you
perceived that they felt better?

19

20

A. Hm-hmm.

21

Q. But you didn't know why they
felt better?

22

A. No.

23

24

25

Q. Were you prepared to take it



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on faith if they felt better, that was a good sign?

3

A. Yes.

4

Q. Did you ask Liz Radojewski,

5

who had I gather said that she would let you know all

6

about these things -- did you say to her, "Well, what

7

is it that makes you feel better than you did at

8

nine o'clock this morning? Let me in on the secret.

9

I would like to feel better too."

10

Did you say that to her?

11

A. No, I didn't.

12

Q. Did you get the feeling she

13

knew something you didn't?

14

A. Not that day, not the Monday.

15

Q. If she knew no more than you

16

did, did it occur to you to wonder how she could feel
good about that? You didn't feel good about those
events, did you?

17

A. I felt good after leaving the

18

meeting.

19

Q. You felt good because she

20

felt good?

21

A. Yes.

22

Q. But if you hadn't seen her,

23

you wouldn't have felt good about those events, would
you?

24

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A. Probably not, no.

3

Q. Well, did you wonder how

4

come she feels good about this? Does she know something I don't know? Did that occur to you?

5

A. No.

6

Q. She evidently did feel

7

better than she had and you took some comfort from that?

8

9

A. Hm-mm...

10

Q. Do you recall any other

11

discussion about any of the children at the meeting on the Monday night?

12

A. No, I don't.

13

Q. Was there any discussion on

14

the Monday night about your return to work? You

15

were scheduled to go back in again on Wednesday. Was there any mention made of that?

16

17

A. No. It was -- I had assumed that we would be back Wednesday. Nothing was said to the contrary.

18

19

Q. Was there any reference made on the Monday night to the presence of police officers in the Hospital?

20

21

22

A. No, there wasn't.

23

Q. Did you go in to work on

24

25



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Wednesday morning?

3

A. No, I didn't.

4

Q. Why not?

5

A. Liz Radojewski called me on
Tuesday.

6

Q. What time?

7

A. Tuesday afternoon about five

8

o'clock I guess, or 4:30 or something.

9

Q. To say what?

10

A. She had phoned to tell me that

11

my team would be off again on Wednesday. She said that
she would call me Wednesday to let me know about

12

Thursday, about returning to work. She seemed to be

13

a little concerned. She asked me what I would do

14

tomorrow, and I said that I would be home. She told

15

me that there was going to be a meeting at the

16

Hospital around ten o'clock, 10:30 in the morning,

17

and that there was going to be a press release that

18

afternoon, around noon.

19

Q. I don't particularly want to
get into the press release.--

20

A. Okay

21

Q. -- and the meeting. I asked

22

you was there any reason given to you for the

23

instructions that your team was not going to be working

24

25



1
2 on the Wednesday? How did she explain that to you?
3 A. She just said that you can't
4 come in to work tomorrow.
5 Q. All right. No talk at this
6 time about stress and strain or anything of that sort?
7 A. No.
8 Q. Was there any reference to
9 Mrs. Bell's team and whether they would be working
10 on the Wednesday?
11 A. I can't recall if I asked her
12 then or not.
13 Q. What was your reaction to that
14 news?
15 A. I was quite concerned after
16 her telephone call.
17 Q. Yes. Well let's stay during
18 the telephone call for a moment. What did you say
19 when she said you are not allowed to come in to work
20 on Wednesday, your team?
21 A. I said why?
22 Q. Okay. What did she say?
23 A. She said I really can't say
24 anything more than that. You just can't come in to
25 work tomorrow.
Q. All right.



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A. She then proceeded to say that there was going to be a meeting.

Q. So once again you were going to have to wait for your answers?

A. Hm-mm.

Q. Did she seem to be as content with things as she had on the Monday night at the meeting or did she now seem to be upset and concerned herself?

A. Yes, she did.

Q. All right.

A. She was concerned.

Q. So such comfort as you had been able to take from her good feeling on Monday was now dissipated: you were now very concerned, I take it?

A. Hm-mm.

Q. Did you connect these instructions about not coming in on Wednesday with the events of the weekend as you had seen and heard them?

A. I don't know if I connected it. I was concerned that it was our team that was off. I was also concerned that it was only our team.

Q. Yes.



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A. That Bertha Bell's team was still working and Mrs. Radojewski seemed to be quite worried on the phone that day but wasn't giving us any answers. She was very direct. "No, you can't come to work", and that was about as far as she was going.

Q. Did you at that time draw a connection between those orders, that you can't come to work, and the investigation that on Sunday and Monday had apparently been going on? Did you make that connection at least?

A. I don't think I did, no. I knew that -- I knew that we weren't allowed to work. I knew the team wasn't allowed, and I still knew the supervisors were still on the floor. I knew that there was a Hospital investigation. I didn't -- I don't think I really put it that it was directly on our team.

Q. But did you not connect the order "You cannot come in to work" with the investigation that you knew to have been going on? Are you really saying that you didn't put those two things together in your own mind?

A. I think what I had done was, they didn't want us there, our team.



1
El4 2 Q. Evidently. Did you wonder why?
3 A. Yes.
4 Q. Did you think it might have
5 something to do with that investigation they evidently
6 had been conducting?
7 A. Hm-mm, yes.
8 Q. I would be surprised if you
9 hadn't.
10 A. Hm-mm.
11 Q. And that of course must have
12 made you the more curious about what that investigation
13 had been about?
14 A. Hm-mm.
15 Q. Didn't it?
16 A. Yes.
17 Q. Did anything now occur to you,
18 now on Tuesday? You know there has been an investiga-
19 tion and you now have orders your team is not to go
20 in for work as scheduled on Wednesday. Did anything
21 now occur to you as to what they could possibly be
22 looking into at the Hospital?
23 A. No.
24 Q. Did you at this stage draw
25 any connection between that investigation and the
deaths that had been occurring?
A. No, I hadn't.



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Q. You did not?

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A. No.

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Q. So, all that you knew, if I

5

understand you correctly, and please tell me if there

6

is more, but all you knew is that there had been a

7

series of unexplained events starting at about 8:30,

8

quarter to nine on Saturday night with the orders

9

from Costigan?

10

A. Right.

11

Q. They had progressed through

Saturday night into Sunday?

12

A. Hm-mm.

13

Q. Through Monday, it was now

14

Tuesday, you were not allowed to go back to work,

15

there was an investigation obviously going on in

16

matters which clearly concerned you and your team

17

because you were told not to go to work?

18

A. Hm-mm.

19

Q. And you had absolutely no

thought as to what might be happening, you made

20

no connection between the events of the month and

21

the events of the last three days?

22

A. No, I didn't.

23

Q. You were left entirely in the

dark, what's happening to us?

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A. Hm-mm.

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Q. At that stage did you contact
any member of your team?

5

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A. I had, Janet Brownless because
we were going to have lunch.

7

Q. Yes.

8

9

A. And Susan Nelles, but I can't
remember what time, whether it was after I spoke to
Liz or a couple of hours after.

10

11

Q. Did you call her?

12

A. I think I did, yes.

13

Q. All right. And what was your
purpose in calling her?

14

15

A. I had called her to see if
Liz had gotten in touch with her because when I was
speaking to Liz Radojewski she wasn't able to contact
Susan yet.

16

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Q. I take it therefore that must
have been after the call from Radojewski to you on
the Tuesday?

19

20

A. Hm-mm.

21

Q. To tell you not to come in?

22

A. Right.

23

Q. So, you wanted to know if
Radojewski had managed to get hold of Nelles?

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A. Hm-mm.

Q. And had she?

A. Yes, she had.

Q. All right. And what was said between the two of you as to the news that you had received? Was there any discussion as to what was going on, what was this all about?

A. The discussion was, what's going on.

Q. Yes.

A. Mrs. Radojewski had told Susan exactly the same thing as she had told me, had told her about the meeting and that she would be calling us later on the Wednesday and Susan said that she was a little concerned at this point because it was just our team and she had asked Liz Radojewski why her team.

Q. Yes.

A. And she wasn't given any answers for it and Susan had said at that time that she was going to talk to her roommate that evening.

Q. Okay. When Mrs. Radojewski spoke to you on the Tuesday was there any reference then to the presence of policemen in the Hospital?

A. No, there was not.



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Q. You were still not aware of that?

A. No.

Q. Mrs. Trayner, at what point did you first make a connection between the events that began on the night of Saturday, March 21st and the deaths that had occurred certainly earlier in the month of March and indeed the deaths that had occurred going back to the summer of 1980? When did it first occur to you that all these things might be of one piece?

A. It was probably on the Wednesday morning.

Q. On the Wednesday morning?

A. March 25th.

Q. All right. And we will be coming at another time and another stage to the events of the Wednesday morning. You were interviewed on the Wednesday morning?

A. Yes.

Q. Are you telling me then it was not until the police spoke to you on the Wednesday that a connection first occurred to you between the number of deaths?

A. Hm-mm.



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MR. PERCIVAL: Mr. Commissioner,
could we clarify that. I am not sure, is it because
of the police telling her or was it something else
that happened I wish Mr. Lamek could clear that up,
I don't want to get into that, obviously.

MR. LAMEK: Perhaps, Mr. Commissioner,
we could take a short break and I could think about
just where I'm going with this.

THE COMMISSIONER: Yes, all right.

MR. LAMEK: Thanks.

THE COMMISSIONER: We'll take
20 minutes then.

--- Short recess.

--- Upon resuming.

THE COMMISSIONER: Yes, Mr. Lamek.

MR. LAMEK: Q. Could we just go
back for a moment, Mrs. Trayner, to the Sunday
evening. You heard from Mrs. Radojewski late
afternoon that you were not to go in to work the
next morning.

A. Right. On Sunday, sorry?

Q. On Sunday.

A. Yes, we weren't allowed to go
in on Sunday night.

Q. I'm sorry, you are absolutely



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right, Sunday night. Now, you told me that you called Miss Nelles on the Tuesday having heard that you were not to go in on Wednesday.

A. Hm-mm.

Q. Did you call Miss Nelles on the Sunday?

A. I can't remember if I did or not.

Q. Fine. But you did tell me that Mrs. Radojewski's message to you was that you were given the night off with pay because of the stress and the strain of the night before?

A. Yes.

Q. And that you accepted that as the reason for not going in?

A. Hm-mm.

Q. And did you continue in that frame of mind that that was the reason for getting the night off right through until Tuesday or did you ever change your view of why you were given the Sunday night off?

A. No, I think that stayed with me until Tuesday when I spoke to Liz again.

Q. So, throughout the period from receiving that telephone call from



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Mrs. Radojewski on Sunday afternoon until the call on Tuesday you were perfectly happy and content with the explanation given for not going in Sunday night, that is to say, the hospital wanted you to take the night off with pay because of the stress and strain of the night before?

A. Right.

Q. Do you recall being asked about that at the preliminary hearing, Mrs. Trayner? This, Mr. Commissioner, is in Volume 6 at page - it really begins on page 1220, starting at line 19. During cross-examination Mr. Cooper asked these questions and you are reported as having given these answers:

"Q. In any event, you were phoned on the Sunday night following Justin Cook's death?

A. That's correct.

Q. By Liz Radojewski?

A. That's correct.

Q. And you were told not to come in for your Monday shift, is that correct?

A. For the Sunday night shift.

Q. For the Sunday night shift,



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"fair enough. And you were angry?

A. I was surprised.

Q. You were surprised. Weren't you disturbed?

A. We were disturbed because we had no reason as to why we were off.

Q. I'm not casting any arrows in your direction it's something that we would expect so why can't I go in to work, what have I done wrong.

A. That's correct, yes.

Q. I take it you felt to some extent centred or accused in some way?

A. Well, we wondered why we were off and 4B wasn't off.

Q. Right. So, you felt centred?

A. That is correct.

Q. Like maybe you had done something wrong, they didn't want you around there?

A. We thought there was something going on but we weren't sure.

Q. Right. Did you speak to Susan Nelles that night?

A. Yes, I did.



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Top of page 1222:

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"Q. Did you ask her whether she was told that she wasn't to come on too?

A. Liz Radojewski had told me that the whole team was off.

Q. Told you the whole team was off?

A. That's correct.

Q. Did you speak to some other members of the team or all other members of the team that Sunday night?

A. No, I spoke to Susan.

Q. Yes.

A. I called one of the other, Bertha Bell, after I had received my call from Liz to see if she was off and she wasn't off."

"Q. So, it led you to understand that only the nurses on 4A were to be off?

A. That's correct.

Q. And after that you spoke to Susan Nelles?

A. That's correct.



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"Q. And she was disturbed that she couldn't go in on the Sunday night shift?

A. We were just doubtful as to why the reason was that we were under too much stress and to take the night off.

Q. That was the reason given to you?

A. Yes.

Q. But I take it that you felt there must be some other ulterior reason that wasn't being specified to you, is that right?

A. Yes.

Q. You and Susan Nelles both felt that way?

A. Hm-mm.

Q. And were you somewhat angry?

A. Yes.

Q. All right, was Susan Nelles somewhat angry also?

A. Yes."

Now, do you recall giving that evidence at the preliminary hearing?



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A. Hm-mm.

Q. And were your answers at that time true?

A. Yes.

Q. That indeed you did speak to Miss Nelles and the two of you thought there was some ulterior reason other than the one given to you for being told not to go in on the Sunday night?

A. Well, I thought maybe I hadn't explained myself properly, that the Hospital had never done this before and that was strange. It was very different that they would pay us to stay home and call in people to take our shift and that if we were under the stress - I can remember you know in March when there was a lot of children dying that we weren't given time off, that it just seemed strange on the Sunday that we had gotten it off.

Q. Well, I agree it seems strange but you just told me a couple of minutes ago, Mrs. Trayner, that you accepted until Tuesday the reason that Mrs. Radojewski gave you for you getting the night off.

A. Yes, I did.

Q. You accepted that you were



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given the night off because you were under stress
and strain from Justin Cook's death?

4

A. Hm-mm.

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Q. But at the preliminary hearing
did you not tell Mr. Cooper when he asked you, after
referring to the stress reason:

7

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"Q. I take it that you felt there
must have been some other ulterior
reason that wasn't being specified
to you, is that right?

10

11

A. Yes."

12

13

Now, did you or did you not accept
the reason that Liz Radojewski gave to you when she
told you not to come in on Sunday night?

14

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A. I accepted it that we were off.
What I couldn't understand or accept was that Bertha
Bell's team wasn't off.

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Q. Did you accept that you were
given the night off because of the stress and strain
of the preceding night or did you think that was a
camouflage and there was some other reason for
giving you the night off, which was it?

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A. No, I thought it was from the
stress of the Saturday night.

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Q. Are you therefore telling me

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2 that when you told Mr. Cooper at the preliminary
3 hearing that you felt there had to be some ulterior
4 reason that wasn't being specified to you, that that
5 answer was not true?

6 A. No, I think it was just
7 strange that the Hospital would give us the time
8 off.

9 Q. Well, I know it was strange.

10 A. I could understand them giving
11 us the night off, I couldn't understand giving us
12 the night off with pay.

13 Q. Well, that was unbounded
14 generosity apparently and no doubt very surprising
15 indeed to encounter but in any event the reason that
16 was given to you for that generosity was that you
17 were under stress because of the preceding night?

18 A. Hm-mm.

19 Q. Now, did you accept that as
20 the reason or did you in fact believe, as you told
21 Mr. Cooper, that there was some ulterior reason
22 that wasn't being specified to you?

23 A. No, I believe it to be the
24 events of the Saturday night.

25 Q. And therefore I should - what
am I to do with your answer at the preliminary



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hearing then, was that not so, did you not believe there to be an ulterior reason that wasn't being specified to you?

A. Well, I think my ulterior reason was that they didn't want us on that night and it was due to stress that they were telling us not to come in but Bertha Bell's team was under the same amount of stress as our team would have been and if it was to do with the stress I thought Bertha Bell's team should be off as well; but Liz had explained that that's what it was.

Q. Are you now telling me then that you accepted her explanation without question?

A. Well, I questioned her.

Q. No, did you accept that the reason for you getting the night off was the stress, did you accept that as the reason or did you say to yourself, and apparently to Miss Nelles, there is something else, there is some other reason for this?

A. I don't recall saying that to Susan but I took Liz Radojewski at her word that it was for the stress and that she would get back to us.

Q. Were you angry?

A. I was surprised.

Q. Were you angry?



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A. No, not Sunday night.

Q. And therefore when you told Mr. Cooper that you were somewhat angry am I to disregard that answer as well?

A. Is it 'somewhat angry' or 'angry'?

Q. Neither is "surprise", Mrs. Trayner. Let's look at what you did say. There is a difference is there not between anger and surprise?

A. Okay.

Q. "A. We were just doubtful as to why the reason was that we were under too much stress and to take the night off.

Q. That was the reason given to you?

A. Yes.

Q. But I take it that you felt there must be some other reason that wasn't being specified to you, is that right?

A. Yes.

Q. You and Susan Nelles both felt that way?

A. Hm-mm.



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"Q. And you were somewhat angry?"

A. Yes.

Q. All right. Was Susan Nelles somewhat angry also?

A. Yes."

Now, were you angry or were you not angry?

A. Well, I was angry that Bertha Bell hadn't gotten the time off as well.

Q. Well, that was for Bertha Bell to be angry about, wasn't it? Why were you angry that she hadn't got the night off?

A. Well, our teams were a very close team.

Q. Were you angry, Mrs. Trayner, because you did indeed believe that Mrs. Radojewski wasn't levelling with you as to the reason and you were upset and angry that you weren't being told the real reason?

A. I don't know if I was angry with Liz or that she knew anything more, not on the Sunday night.



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Q. Were you angry at the
Hospital?

A. I was surprised that it --
they had never done that before and now they were
giving us the night off and we had had the deaths
earlier than that and we were not given any time off.

Q. If I may say so, Mrs. Trayner,
that might have been the cause of anger earlier but
not for anger when they do do something to relieve
your stress level. Why would you be angry at this
occasion if not because you believed they were not
leveling with you as to the reason for it?

A. All I can say is I thought it
was strange that the Hospital gave us the night off
with pay. I can't recall being angry with anybody.
It was a very strange time and with the events of the
night before and the death of Justin Cook and now
being told not to come in to work.

Q. And other than that I take it
you cannot help me with an understanding or an
explanation for the evidence that you gave at the
preliminary hearing?

A. I can't recall speaking to
Susan that night.

Q. Do you recall speaking, or



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calling the Hospital that night?

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A. No. I can recall speaking to Bertha. I don't know when it was though.

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Q. At the same page 1222 of Volume 6 of the preliminary hearing transcript, immediately after the answer that I have just read to you, Mr. Cooper asked:

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"Q. You didn't speak to any other nurses on the team that night?"

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"A. I phoned the Hospital that night at midnight to see what was going on."

13

Do you recall now calling the Hospital? Does that assist your memory?

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A. No. I can remember speaking to Bertha. Now, I thought it was Monday but it could have been the Sunday night.

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Q. If you spoke to Bertha on Sunday, and you said, fairly, earlier that you were not sure whether you had or not --

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A. Hm-mm.

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Q. -- that was to find out whether her team was working, wasn't it?

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A. Right.

MR. THOMSON: Mr. Commissioner, it



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seems to me that the difficulty with this long line of questions is that, in fairness to the witness, she said "yes" at the preliminary hearing and she was not asked by your counsel what she understood by the words "ulterior motive". The only word that the witness has spoken down through those questions was "yes". I suggest that what has happened is that Mr. Lamek is pressing the witness to give answers based on what Mr. Cooper's suggestions to the contrary were at the time of the preliminary hearing.

What I rose for, frankly, I was going to leave that, is that surely the second question -- the first question Mr. Lamek just read is:

"Q. You didn't speak to any other nurses on the team that night?"

"A. I phoned the Hospital that night at midnight to see what was going on."

And the next question:

"Q. Yes. None of your team were on?"

"A. None of my team was on."

And the witness of course from the first question was beginning to think that what was being suggested to her was that she had said at the preliminary inquiry



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G4 2 that she had a conversation that night, presumably
3 with Mrs. Bell. I think it is important to remember
4 that she has already said that the evidence that she
5 gave at the preliminary inquiry was evidence that she
6 gave when it was fresher in her mind.

7 THE COMMISSIONER: I am not sure I
8 know where that leaves us.

9 MR. LAMEK: Q. Mrs. Trayner, by
10 midnight on Sunday night, you already knew that your
11 team was not working, did you not?

12 A. Hm-mm.

13 Q. You knew that from your
14 earlier conversations of the day?

15 A. Right, with --

16 Q. I'm sorry?

17 A. With Liz Radojewski.

18 Q. With Liz Radojewski. There-
19 fore, when you called the Hospital at midnight, it
20 wasn't to find out if your team was working; you knew
21 they were not?

22 A. Right.

23 Q. Your evidence was that you
24 called the Hospital at midnight to see what was going
25 on.

A. What I can remember though is



1
G5 2 phoning Bertha to see --

3 Q. Whether she was working?

4 A. No. I knew she had worked
5 and when I had called her on the Sunday afternoon,
6 she was going to work.

7 Q. All right. Did you call her
8 at the Hospital at about midnight on the Sunday night?

9 A. I may have, yes.

10 Q. To see what was going on,
11 and those are your words; not Mr. Cooper's. On this
12 occasion, your answer was more than "yes". You said:

13 "A. I called the Hospital at
14 midnight to see what was going on."
15 Do you recall doing that?

16 A. I may have, yes. I may have
17 called Bertha at that time.

18 Q. Now, what was it that caused
19 you sufficient question and concern in your mind that
20 you would call at midnight to see what was going on?

21 A. Probably just to see how
22 Bertha was and to see who was working on 4A.

23 Q. With respect, that is not
24 what you said. You did not say "to see how Bertha
25 was"; you said, "to see what was going on". What
were you interested in finding out about what was



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going on?

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A. Probably to see who was working on 4A. I think that was -- I used that just as a figure of speech really.

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Q. Well, if I understand you correctly, Mrs. Trayner, do you have any present recollection today of having called the Hospital at about midnight on Sunday night?

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A. No. All I can say is that I remember speaking to Bertha Bell and she was quite upset. Now, I thought it was after the Sunday, but it could very well have been on the Sunday night when I called her.

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Q. It may have been on the Sunday night when you called her. Are you doing any more today - believe me, I am not being critical - are you doing any more today than speculating as to what you might have said to her if indeed you called her on the Sunday night?

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A. What do you mean?

Q. Are you saying there is any more than this: If I called her on Sunday night, it may have been to ask this, that, or the other. Is that really what you are saying today or do you have a recollection of what you said to somebody at the



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Hospital, Bertha Bell or anybody else, on the Sunday night?

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A. No, I don't.

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Q. You don't. Therefore, I take it we have to read what you said at the preliminary as meaning something about which you cannot now help us?

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A. Right.

Q. And you have no clear

recollection of a conversation with Miss Nelles that day, or of any measure of anger expressed by the two of you?

13

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A. No.

Q. As you have said to us on a

number of occasions, and as Mr. Thomson has reminded us, the preliminary hearing was closer in time to the events in question than today, obviously.

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A. Right.

Q. I take it at the preliminary

hearing you were doing your best to give us the best recollection that you then had?

21

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A. Yes.

Q. Today you have no recollection

of ever having had any question about the reason

stated to you for giving you the Sunday night off with



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pay?

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A. Right.

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Q. And your recollection today

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is that you accepted that reason as it was given to

6

you and you didn't have any cause to question it until

7

the Tuesday when Mrs. Radojewski called you again and

8

in a rather more peremptory way said, you can't come
in to work tomorrow?

9

A. Well, I accepted it. There

10

was still surprise. I still questioned Liz, but,

11

you know, I learned very early when I questioned

12

Liz and you really were not getting any further with

13

her that you stopped and that was it. It was her

14

reason, you know, that the nursing administrator - and

15

that was a surprise in itself, that why, you know, the

16

nursing supervisor would be there on the Sunday
afternoon, but she was there.

17

Q. And to the best of your

18

recollection now today you accepted the explanation

19

given to you?

20

A. Hm-hmm.

21

Q. On the Monday night at the

22

meeting at Mrs. Radojewski's house, I think I asked

23

you before the break, Mrs. Trayner, whether you

24

recalled any discussion about deaths, either

25



1
2 individually identified or in a group, other than
3 Pacsai and Cook. I think you told me you recall no
4 such discussion?

5 A. Right.

6 Q. At page 1225 of the same
7 Volume 6 of the preliminary transcript, Mr.
8 Commissioner, Mr. Cooper again was asking you about
9 the meeting on the Monday night. At the bottom of
10 page 1224, at line 28:

11 "Q. Do you remember Susan Nelles
12 saying anything at that meeting, at
13 that get-together?"

14 "A. In relation to what?"

15 "Q. To anything. Do you remember
16 her particularly speaking at that
17 get-together or was it just sort of
18 a conglomeration of people all kind
19 of talking at one time or another?"

20 "A. Well, everybody had a few
21 words to say."

22 "Q. Right."

23 "A. Susan was glad that they were
24 doing some steps now, doing the
25 blood samples on Justin Cook. That
didn't bother her about wanting them



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Mr. Cooper?

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A. No, I don't.

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Q. Does it assist your present recollection, as to whether anybody said anything about this investigation may explain why we have been having the deaths on the floor?

13

14

A. No. I thought it meant Justin Cook and Kevin Pacsai.

15

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Q. Is that what you meant in your answer to Mr. Cooper at the preliminary hearing?

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A. I think so. I am probably being a little difficult with you but I don't -- I can't recall, I really can't, anything more about, you know, a bunch of the babies. I do recall Justin Cook and that there was an investigation or something that had started after his death. We also knew about Kevin Pacsai and about an inquest. Now I don't recall talking or even hearing anything more about the rest of the baby deaths.



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Q. All right. You have no
present recollection?

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A. No.

5

Q. Thank you.

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Then I asked you what it was, when
you finally did come to the point of thinking that
deaths on the floor going beyond Pacsai and Cook may
in some way have been connected. I think you said
that was not until the Wednesday morning?

10

A. Right.

11

12

Q. Was that before the police
arrived?

13

A. No. That was -- well, it was
during their visit.

14

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Q. Was it as a result of something
that was said to you during that visit? I won't
go into that at this point except to say that, if I
understand you correctly, notwithstanding everything
that had happened on the floor since the summer of
1980 and notwithstanding the large number of deaths
in March, the Pacsai incident and the consequences
of that, the Miller death, the Cook death and the
investigation that was going on, at no time prior to
Wednesday, January 25th, did it occur to you to think
that those deaths may in some way be attributable to



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something other than bad luck and coincidence? Do

3

I understand you correctly?

4

A. Yes.

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6

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Q. Until that point you were
satisfied that bad luck and coincidence satisfactorily
explained why all these things should be happening on
your floor in the presence of your team?

8

A. Yes.

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Q. That brings me of course to
a piece of evidence that we have heard here, Mrs.
Trayner, and it is the report of the Centers for
Disease Control and the Ontario Ministry of Health,
the so-called Atlanta Report. I take it you have
read the Atlanta Report?

14

A. Yes, I have.

15

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Q. You are aware that the
Atlanta authors, and when I say 'Atlanta authors,' I
include the Ontario ones of course, you are aware
that the authors of that report, in consultation with
their consultants, pharmacologists, cardiologists,
categorize the deaths that had occurred on the ward
from June 30, 1980 through to Justin Cook?

21

A. Right.

22

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Q. And they categorize them into
three categories, which they called, unimaginatively,



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Categories A, B and C, and into Categories A and B they placed all deaths to which they believed any measure of suspicion at all attached. Category C encompasses deaths which were regarded by their consultants as being entirely natural. That is your understanding?

7

A. Yes.

8

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Q. And there were some 29 deaths I believe in Categories A and B?

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A. Hm-mm-m.

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Q. And having done that you are aware that the authors of the report then cast around to see if there was any association between those deaths and Hospital personnel, and of course you are aware that the only group with which they were able to track associations was the nursing group?

A. Yes.

Q. Information was not sufficient on the other groups for them to make any observations at all. And in particular it was established that for each of the deaths in Category A and B the members of your team had been present to a greater or lesser extent. And of course as you know you were the only person who was present on the floor at the time or within four hours of the death of each of the Category A and B children. You are aware of that?

A. Yes.

Q. I have to ask you, Mrs. Trayner, do you have any explanation for that association, association being either - you can put it either of two ways I think - that you were there when all the suspicious deaths occurred or, putting it another way, all the suspicious deaths occurred when you were



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there. Do you have any explanation for that?

3

A. No. I worked on the floor;

4

I was full time there and I was there when the

5

deaths occurred.

6

Q. But others of course worked

7

on the floor and were full time as well.

8

A. Yes.

9

Q. Mrs. Bell and the core

10

members of her team.

11

A. Hm-mm.

12

Q. Worked opposite your team.

13

And the other members of your team other than
perhaps Miss Brownless were regular full time members
of the team?

14

A. Hm-mm.

15

Q. Is it your suggestion,

16

Mrs. Trayner, that once again the fact that you

17

were there when the other full time working members

18

of the team were not there for so many deaths is

19

again bad luck, coincidence?

20

A. That and the only other thing

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that has crossed my mind is that if someone was using
my schedule.

22

Q. I'm sorry. Can you explain

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that to me?

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A. Somebody - I was, as the Atlanta Report has said I was the one known person there. Unless somebody was using my schedule to make it look like I was the only one there when the deaths occurred.

Q. I'm sorry. I think I know what you are saying but let me be clear: are you suggesting that someone, that someone may have been involved in causing deaths and doing it at times when you were known to be present?

A. Yes.

Q. All right. Putting it rather crudely, setting you up or framing you or something of that sort. Is that what you are suggesting?

A. That has crossed my mind.

Q. Yes. Has it occurred to you as to whether there may be anybody with sufficient animosity to you to want to do that?

A. No.

Q. Can you think of anybody whom you have so angered, so antagonized?

A. No, I can't.

Q. Those are the only two possibilities that occur to you?

A. Yes.



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3 Q. All right. When Mrs. Scott
4 was here she told us of an impression she formed
5 before the end of the year as I recall her
6 evidence that there was a rather strange pattern
7 to the course of many of these children who died
8 on the floor. She said, and she was able to point
9 to three specific examples - she said that her
10 impression was that you were looking after a child
11 and the child was not showing any signs of instability
12 or serious danger, you would go for a break leaving
13 the child in that condition, you would come back
14 from the break finding the child apparently still
15 in the same condition, and within an hour the child
16 was dead. And in particular she referred to Gage,
17 Estrella and Gardner, and if I may say so, Cook
18 seems to fall into that sort of a pattern too.

19 Did you ever make the same observation
20 when you looked back across those deaths?

21 A. No, I didn't.

22 Q. Does it occur to you now
23 looking back over them?

24 A. No.

25 Q. That that was a recurring
theme?

A. No.



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Q. Just one other matter that I want to touch on with you, Mrs. Trayner, and I mean touch on because I am not going to go into this very far. The question of what we called dirty tricks. You know what we are talking about. Bizarre instances is the way of describing it, but there is a sort of Watergate ring about dirty tricks.

In particular I am interested in phone calls. How many phone calls were you aware of? Do you know how many - what is your best information as to how many of these strange calls were made, calls in which there was either silence at the other end of the phone or threats or incriminating things were said?

A. I --

Q. I am not going to hold you to a number.

A. Six, seven.

Q. Six or seven? You didn't receive any of them, did you?

A. No.

Q. At no time did you receive a phone call, threatening phone call?

A. No, I didn't.

Q. Or a phone call where there



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was silence at the other end of the line?

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A. I can't recall if I got silence

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or not, but I didn't get threats over the phone.

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Q. Well, at about that time -

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that is to say the late summer of 1981 - when other

7

people were receiving those strange calls with

8

silence at the other end, I suggest to you that

9

had you received one of those you would remember it.

10

Isn't that likely?

A. Yes, I think so, yes.

11

Q. Because that would be a very

12

disturbing thing to have happened?

13

A. Hm-mm.

14

Q. It was disturbing to you when

15

other people received those phone calls, was it not,

16

and you learned about them?

A. Yes.

17

Q. And therefore would certainly

18

have been disturbing to you had you received one?

19

A. Hm-mm.

20

Q. Did it ever occur to you to

21

wonder why you didn't receive any of those phone

22

calls? Why did you escape? Did that ever cross

23

your mind?

A. I didn't know that there was

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many silence calls but there was when we first heard about it, I thought it came from Sui Scott's children.

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Q. All right. Well, silent or threatening, did it ever cross your mind as to why you didn't receive any of those calls?

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A. No. Well, I thought that I would probably recognize the voice, and that is why the assumption or the suggestion that came from the police officers at the time.

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Q. That you would recognize the voice?

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A. Hm-mm.

13

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Q. Which has to mean that the probability was it was a person known to you?

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A. That is what they were saying, yes.

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Q. Did you have a view on that?

19

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A. Well, I thought since I didn't receive any and Sui Scott hadn't received any that perhaps we probably would have recognized the voice.

21

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Q. Your husband didn't receive any phone calls either, did he?

23

24

A. No.

25

Q. There were calls made but he didn't take them?

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Trayner, ex.
(Lamek)

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A. Right.

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Q. And we know that Mrs. Scott

4

didn't receive any where anyone spoke to her?

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A. Hm-mm.

6

Q. The calls that were made to

7

her when threats were made were taken by her children?

8

A. I think I can recall two of

9

them.

10

Q. Yes. Do you know of anybody

11

at the Hospital who ever heard a voice on the end of
the telephone on any of those calls?

12

A. Anna Fernandez.

13

Q. Did she receive a call? Do

14

you know what was said in that call?

15

A. I can't recall what was said.

16

It was something to do with Trayner and Scott.

17

Q. She could not recognize the

18

voice?

19

A. I don't know. She said that

20

it sounded like Susan Nelles.

21

Q. All right. Do you know anyone

22

who received a phone call who would have recognized
your voice?

23

A. Some of the people that the

24

phone calls had gone to I have spoken to a few of

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the people, and I would almost be sure that they
would know my voice.

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Q. All right. Can you tell us
who they were?

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A. There would be Ross Atkinson
from the Royal Regiment of Canada.

7

8

Q. At the Amouries, yes.

9

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A. I have known Ross for several
years. I used to date him so I would hope that he
would know who I was. Mrs. Asselin I think,

11

Bernadette, who was the receptionist at my husband's --

12

Q. Your husband's place of
employment, yes.

13

14

A. Yes. I speak to her at least
once a day on the phone, and she knows my voice.

15

16

Bernice Bailey the supervisor at the Hospital knows
me, has spoken to me on several occasions by getting
report, and report over the phone, and I would think
she would know my voice as well.

17

18

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Q. I take it you have spoken to
all of those people on a number of occasions?

20

21

A. Hm-mm.

22

Q. A number of different situations?

23

A. Yes.

24

Q. I guess fairly I have got to

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ask you, Mrs. Trayner, whether on all those occasions you had spoken to them in your normal voice as you are using it now?

5

A. Yes.

6

Q. And they would recognize your voice as you are using it now?

7

A. Hm-mm.

8

9

Q. All right. There was a call to your bank manager, was there not?

10

A. Yes.

11

Q. Also called Mr. Atkinson?

12

A. Yes.

13

14

Q. And you arrived at the bank very shortly after he received that call?

15

A. Yes.

16

Q. Can you tell me what happened?

17

A. Before we had left or just getting to the bank?

18

19

Q. Go as far back as you need to have me understand it properly.

20

21

A. Well, my husband and I had driven - took the car and we drove down and we came into the bank and we were standing at the corner and Mr. Atkinson had come over to me - I was filling out a withdrawal slip - and he said to me and my

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2 husband that I had just received a very strange
3 phone call about you.

4 Q. What was your reaction to
5 that?

6 A. I think I said oh, no, and
7 then he said come into my office, and he said we
8 just got a call and I said, oh, God, no, they have
9 phoned here, and he explained the phone call to us.
10 I think I was probably crying by that time, and my
11 husband was with me.

12 Q. Your recollection is that
13 Mr. Atkinson said to you I just received a very
14 strange phone call about you? You are aware that
15 Mr. Atkinson gave evidence at the preliminary hearing?

16 A. Yes.

17 Q. You are aware that his version
18 of what occurred is somewhat different?

19 A. Yes.

20 Q. You're aware that it was his
21 evidence that you were upset before he ever mentioned
22 anything about the content of the telephone call.
23 He merely said I have just received a telephone call.
24 I can refer you to his exact evidence.

25 A. No, I know, I have read his
evidence.



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H12 Q. Yes. And essentially you are
telling me that your recollection and his are not
quite the same?

A. No, they are not.

Q. All right. And you did not
display any emotion or upset or concern before you
had at least heard something from him about the
phone call, that it was very strange and about you?

A. Yes. That's correct.

Q. It may be that in that whole
episode of what I call the dirty tricks others will
want to go a little further with you, Mrs. Trayner.
Just one final question if I may: on the night
that Justin Cook died do you recall at any time
seeing the curtains drawn around his bed?

A. No. To the best of my
recollection they weren't.

MR. LAMEK: Okay, Mrs. Trayner,
thank you very much. Those are my questions.

THE WITNESS: Thank you.

THE COMMISSIONER: Mr. Brown?

MR. BROWN: Mr. Commissioner, we
have no questions of Mrs. Trayner. There is one
matter I would like to address briefly, however.

THE COMMISSIONER: Yes. Certainly.



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MR. BROWN: Which is really more
a matter of argument, but in view of the nature of
this proceeding if I simply might raise it, and
that is the testimony of Anna Fernandez at the
preliminary inquiry.

THE COMMISSIONER: Yes.

MR. BROWN: Which Mrs. Trayner just
addressed. May I point out for your reference,
sir, two things? First of all, on her examination
in chief Mrs. Fernandez, in Volume 15, at page 129,
testified that the voice she heard on the telephone
sounded like Susan Nelles.



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During her cross-examination by Mr. Cooper, and this can be found in Volume 16 at page 41, she says she was uncertain as to the identity of the caller. Then at page 43 she stated that she was not prepared to swear at that time that the voice indeed was that of Susan Nelles.

The second matter which I would perhaps draw to your attention, sir, is that the exhibit filed during the testimony of Miss Nelles with respect to the alibi evidence for the strange events shows that this phone call probably occurred on Sunday, August 23rd at approximately 3:00 p.m. in the afternoon and the explanation Miss Nelles gave as to her whereabouts on that day at that time was that she was in the presence of two friends at her cottage, and you may recall that the cottage had no telephone.

Save for that clarification we have no questions of this witness, sir.

THE COMMISSIONER: All right. Thank you.

Mr. Hunt?

MR. HUNT: Thank you.

CROSS-EXAMINATION BY MR. HUNT:

Q. My name is Hunt and I represent



1
I2 2 the Attorney General and the Crown Attorneys and some
3 of the Coroners.

4 Ma'am, let me start first with
5 something that you just said a few minutes ago which
6 took me somewhat by surprise. I understand you say
7 that it has crossed your mind that someone may have
8 set you up or framed you.

8 A. Yes.

9 Q. And when did that first cross
10 your mind?

11 A. I don't know if it was before
12 the Atlanta Report. Actually, it was probably before
13 the Atlanta Report; I can't remember when.

14 Q. Before you heard that the
15 Atlanta Report had analyzed these deaths and
16 categorized them and in fact you were the only common
17 factor at all of the Category A and B deaths?

18 A. Well, I had known that from
19 the police in their second part of the investigation.

20 Q. Did you arrive at this
21 conclusion yourself or were you assisted by anyone in
22 coming to that conclusion?

23 A. No, I was by myself.

24 Q. So, I take it you realized
25 that there is a rather significant body of evidence



I3 1
2 here that we have heard that suggests that these
3 29 deaths that are categorized as A and B may well
4 be the result of an intentional overdose?

A. Well, we have heard that, yes.

Q. Certainly. And the
Commissioner may in fact find that all 29 were
deliberately killed?

A. Yes, he may.

Q. And I put it to you that if
the Commissioner so finds and you, as you have said,
didn't have anything to do with the deaths of these
children, then the notion of a frame-up or a set-up
is the only realistic conclusion, is it not?

A. If he finds that these
children were killed?

Q. That's correct.

A. Well, I have no reason for
it, no explanation.

Q. I appreciate that, and you
have said that. I am suggesting to you if the
Commissioner finds that the only realistic conclusion
we can come to if you didn't have anything to do with
the deaths is that you were set-up?

A. That's right.

Q. And I take it that makes it

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25



1
2 all the more frustrating for you because you can't
3 recall the events of most of the nights in question
4 when the children died?

5 A. Well, I can't remember some
6 of the babies.

7 Q. Well, we will get to this
8 later, but I am going to suggest to you that with
9 respect to most of these children you don't recall
10 the events on the nights that they died?

11 A. No. I guess you are right
12 there.

13 Q. And this is important to you
14 I suggest because whoever set you up or framed you
15 had to be there on the ward on the same shifts as you
16 were each time one of those babies died?

17 A. Right.

18 Q. So, you are the person who,
19 of all the nurses on your team, had the best oppor-
20 tunity to observe this person, whoever it was, and
21 perhaps observe something suspicious about them?

22 A. Well, if I had seen the
23 person.

24 Q. Well, you were there more than
25 anybody else.

A. Yes, you're right.



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Q. So, every time you were there,
or every time the person was there killing a baby,
you were also there, we know that.

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A. Well, I am not sure if we can
make that assumption that these babies were all killed.

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Q. I am saying if the Commissioner
finds they were killed, we are in this situation, are
we not, that every time the person was there killing a
baby, you were also there?

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A. Right.

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Q. So, you, more than any of
the other nurses on your team, had the best opportunity
to observe this person and observe anything suspicious
just by the fact that you were always there?

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A. Right.

Q. But based on your present
recollection, I take it that you can't recall now
having seen anything that excites or excited in you
a suspicion about somebody else's behaviour?

A. Not really, no.

Q. Now, if you were framed, Mrs.
Trayner, would you agree with me that whoever it was
they had to fit a certain set of criteria; they had
to have direct access to the children without arousing
any suspicion?



1
2 Q. And they had to be able to
3 exercise that access to the children in the middle of
4 the night without arousing suspicion?

5 A. Hm-mm.

6 Q. And they had to be somebody
7 who was familiar to the general personnel on the
8 ward so that they wouldn't arouse suspicion?

9 A. Hm-mm.

10 Q. And they would have to be
11 someone who had a reason to be there repeatedly in
12 the middle of the night?

13 A. Well, they would probably have
14 been known.

15 Q. Well, they had to have some
16 reason that would allow them to be there repeatedly
17 on long night shifts without arousing suspicion?

18 A. Okay.

19 Q. And I take it that that
20 really restricts us to somebody who is involved in
21 the medical care of these children?

22 A. Hm-mm.

23 Q. Either a doctor or a nurse?

24 A. Well, we had free access to
25 the floor, you know, it wasn't --

Q. I am not disputing that. I



1
2 am saying that really because of the nature of the
3 access directly to the children it had to involve
4 somebody who was responsible for medical care?

5 A. Hm-mm.

6 MR. PERCIVAL: Mr. Commissioner, I
7 rise only because of the fact it is very difficult
8 for these reporters, in fact one of them came up to
9 both Mr. Thomson and myself at the recess for coffee
10 this morning saying it is most difficult to put down
11 'hm-mm', 'uh-huh', 'hm-hmm' and I think for the purposes
12 of some history of this Commission, this witness
13 should be asked to say 'yes' or 'no' if that is her
14 answer.

15 THE COMMISSIONER: Yes. It does
16 help. I know we naturally speak that way and we all
17 do it but I think for the sake of the reporters I
18 really -- I know this will make me unpopular with
19 the media, but I am really talking about the reporters
20 down here - it is better if you say 'yes' or 'no', if
21 you can, although, whatever your natural habits are.

22 Yes, all right.

23 MR. HUNT: Q. If it is someone
24 involved in the medical care, we can really rule out
25 others such as the cleaning staff, the maintenance
staff, the lavatory people, can we not?



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A. Yes.

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Q. Now, would you agree with me that if the same doctor appeared unsummoned by anyone on the ward an hour or two before each one of these 29 children went into distress during the long night shift, that that would be suspicious?

7

A. Looking back?

8

Q. Sure. From your own experience on the ward.

9

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A. Well, we had a lot of doctors that came on our floor and they kept coming back and we never questioned them.

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Q. I'm talking if the same doctor had appeared uncalled for by anyone on the ward an hour or two before each one of these children went into their terminal events --

16

A. Mm-hmm.

17

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Q. I am suggesting to you that that would have been suspicious.

19

A. Can I just clarify? Is that looking back now today?

20

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Q. Yes.

22

A. Okay, yes.

23

Q. You agree with me?

24

A. Yes.

25



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2 Q. And if something like that
3 had happened, and you agree that that would be
4 suspicious, that is the sort of thing that you likely
5 would have remembered?

6 A. Yes.

7 Q. So, I am suggesting to you
8 we can really rule out the doctors, can we not,
9 simply by weight of the numbers of times that a
10 suspicious death occurred?

11 A. Well, the doctors did have
12 free access to our floor, they could come and go as
13 they pleased. We were a hospital, a nursing staff
14 doing a job, we didn't see the need to question
15 people.

16 MR. THOMSON: Excuse me, Mr.
17 Commissioner. I wonder if it is really helpful for
18 you to ask this lady to participate in a review of the
19 investigation that presumably was done by the police
20 and by the Attorney General. In my submission, it is
21 not a useful line of cross-examination. She shouldn't
22 be asked to speculate, and that's all this amounts to,
23 as to whether it was the cleaning staff, whether it
24 was the doctors. She doesn't have access to all the
25 investigation reports.

THE COMMISSIONER: Well, Mr. Hunt,



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2 you are going to have to remind me. You know, I have
3 been told not to name names and I would think that
4 even to eliminate doctors is in the form of naming
5 names.

6 MR. HUNT: Sir, this goes back to
7 the question of characterizing these deaths.

8 THE COMMISSIONER: That's right,
9 that's right. I said you just have to remind me,
10 that's all.

11 MR. HUNT: Well, that's the issue
12 that I am going through here. If we can find out
13 from Mrs. Trayner by assisting her to reconstruct her
14 recollection of these events and we can come up with
15 someone who set her up, we may well be on the trail
16 of the person who can help you categorize these
17 deaths as either intentional killing or not.

18 THE COMMISSIONER: Yes.

19 MR. THOMSON: Yes, and it is not
20 helpful, may I say it again, for Mr. Hunt to put it to
21 this lady until she agrees that, for example, it
22 couldn't have been a member of the cleaning staff,
23 it couldn't have been a doctor. I appreciate the
24 broad ruling that you made earlier and I accept it.
25 I am not here arguing against your ruling, but that
is not helpful. All that is doing is putting this



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lady in a position in which, confronted with the
Attorney General's questions, she is going to say yes.

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MR. HUNT: As much as I would like
to be the Attorney General, I am not. My friend
suggests it is not helpful. Surely --

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MR. THOMSON: I wonder if he is
speaking with the Attorney General's authority, per-
haps that's the point.

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THE COMMISSIONER: Well, I think we
have to assume that.

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MR. HUNT: Yes, I think my friend
can assume that that is correct.

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My friend says it is not helpful.
Surely, sir, the witness has really for the first time
suggested to us an alternative or an explanation for
what has happened that has put her present at these
deaths and if we can get to the bottom of this and
come up with another name --

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THE COMMISSIONER: Well, even with
another alternative, it is only a question of who did
it, isn't it? Doesn't the alternative -- you have
established the fact that - well, I don't know whether
you can say you have established the fact, you have
certainly obtained the answers that you sought, that
it was not anyone, not likely to be anyone involved in



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these deaths except a medical person; that is, if I should find that these deaths were brought about by unnatural means -- How far are we going to go as to, assuming I find that, who is responsible?

You see, the only way that the identity of people is at all helpful in determining, at least as I can see it now, in determining the cause of death is the fact of the coincidence, that is, the fact that so many of the children died while one team of nurses or some member of a team of nurses is on.

MR. HUNT: That's the chink in the armour, sir, of whoever may have set Mrs. Trayner up; they were there the same times as she was and the same times as these children died.

Test it this way. If we were to come up with the name of someone --

THE COMMISSIONER: Well, I know, but what you are going to get at the end of it is, you are going to get the identity of a murderer, isn't that it?

MR. HUNT: Wouldn't you be interested in hearing from someone that was there?

THE COMMISSIONER: I would be extremely interested, I am just concerned about whether



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I am supposed to be, that's all.

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THE COMMISSIONER: I am afraid you are right about that, but what I think Mr. Thomson is concerned about is you just go on and we will convert this and instead of doing a search for the cause of death, doing a search about the causer of the deaths and that we can't do. Now this is going to be my problem throughout all of the re-examination. I am going to allow it to proceed for the moment but I will give some thought to it over the noon break and I think you have to do that too, Mr. Hunt.

MR. HUNT: Yes.

THE COMMISSIONER: Because there comes a time, your point has already been made and any further pressing of it cannot assist me in the cause of death.

MR. HUNT: I will ask the witness the question again and see if she responds.

THE COMMISSIONER: Yes. All right.

MR. HUNT: Q. I am suggesting to you, Mrs. Trayner, that by virtue of the simple weight of the numbers and times that suspicious deaths occurred in the middle of the night, we can rule out a doctor as having been responsible, because it would just have been too suspicious for a doctor to have been showing up unannounced on all those



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occasions.

A. I can't agree that you can rule them out.

Q. You don't want to rule out the doctors. I am going to suggest that a doctor couldn't meet those criteria that we just went over a few moments ago, because uncalled for in the middle of the night, a doctor continually or repeatedly having access to the children is something that is going to be arouse suspicion.

A. I don't know. I don't think it would have aroused suspicion at that time. We had doctors that will come back and they may be in looking at a baby, and we wouldn't say, you know, what are you doing here, or where did you come from. We may have known them from a tour that they did on 4A, you know, three, four, five months ago, they could be on a tour on another floor and they could have just come down just to see who was working.

Q. In any event you don't remember that sort of thing happening 29 times in this period with the same doctor?

A. No, not today I can't.

Q. Mrs. Trayner, you see the importance of your lack of recollection of so many,



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indeed most of the nights and the deaths in question
from the point of view of helping to determine who
might have set you up in this way?

5

A. Hm-mm, yes.

6

Q. And as you agree it makes it
all the more frustrating for you and for us?

7

A. Yes.

8

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Q. And would you agree with me
that with respect to some of these nights, no matter
what your recollection may have been in the summer
of 1980 and the fall of 1981, now you have no
recollection of what occurred?

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A. I don't understand your
questioning.

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Q. No matter what you may have
recalled about the nights in question and the events
that led up to the terminal event and the arrest
back in the summer of 1980 and the fall of 1980,
and even into the spring of 1981, at this point in
time, three years later, you don't have that
recollection?

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A. On some of the babies, most
of the babies?

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Q. Indeed most of them.

24

A. Okay, that's fair.

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Q. And you see the importance of having that recollection just from your own point of view, in trying to determine who could be responsible for setting you up?

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A. Yes.

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Q. Are you familiar with the drug called sodium Amytal?

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A. Yes.

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Q. You know it acts like Pentathol which is frequently given to relax people before an operation?

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A. Yes.

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Q. You are aware that it reduces inhibitions and fears?

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A. Yes.

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Q. You know it has been widely used by doctors to allow people to recall painful experiences?

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MR. THOMSON: Mr. Commissioner --

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THE COMMISSIONER: Yes.

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MR. THOMSON: If my friend proposes to ask my client whether she wants to take and have use of a drug like this, surely that is something that first of all I should have been warned about so I can take instructions and find something out



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3 about it. Secondly, surely this is not helpful in
4 your process. I suggest what my friend is doing is
5 playing to the media. I think that is an inappropriate
6 approach to the problem.

7 THE COMMISSIONER: Where are we
8 going, Mr. Hunt?

9 MR. HUNT: First of all my friend
10 suggests that this is a matter of playing to the
11 media, and I dispute that certainly.

12 THE COMMISSIONER: No, no.

13 MR. HUNT: The witness has over
14 the course of the past week indicated a lack of
15 recollection, total recollection of many of these
16 incidents. I am about to - and I wasn't going to
17 ask the witness for an answer to the question sitting
18 here, it is obviously something she might wish to
19 discuss with counsel. In view of the importance of
20 recollection to her, just in terms of who might be
21 responsible for setting her up and the importance of
22 recollection generally, I was about to ask the witness
23 whether she would consider whether or not she was
24 agreeable to answering questions with respect to
25 these --

THE COMMISSIONER: I think you can
relax on this one, Mr. Thomson.



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TORONTO, ONTARIO

Trayner, cr.ex.
(Hunt)

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MR. THOMSON: I would like to say

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I wonder why the question was not asked of other

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witnesses.

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THE COMMISSIONER: Well, I really

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don't - I have a great deal of difficulty with this

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one. I must say, when you were talking about

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sodium Amytal and the relaxation and the release

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of inhibitions, I could think of a lot of stuff that

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I take that is even better for that purpose, but I

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don't think we have reached the stage where when a

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witness says I can't remember we offer some of this

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drug and say, try it with this. We haven't been

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doing that, as Mr. Thomson pointed out we have not

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been doing that with anyone else, and so I am not

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going to allow a question relating to this drug to
be put to the witness.

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MR. HUNT: I just point out, sir,

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it hasn't been quite as important with any other
witness.

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THE COMMISSIONER: It has been

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important with every witness, every witness who

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has been there in the presence of a child who was

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resuscitated, and certainly Susan Nelles and Sui

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Scott were there for at least 22 of these allegedly
suspicious deaths.

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MR. HUNT: No one though, sir, has been there for all of them and who feels they may have been set up by someone else where recollection in my submission is most important.

THE COMMISSIONER: Well, at any rate it is too novel an approach for me and I am an old fashioned type so --

MR. HUNT: I was about to move into another area if that is appropriate.

THE COMMISSIONER: All right, shall we do that at quarter past 2:00.

---Luncheon recess.



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--- on resuming at 2:15 p.m.

THE COMMISSIONER: Mr. Hunt?

MR. HUNT: Thank you.

Q. Mrs. Trayner, I would like to spend some time looking at the period, the nine-month period, when some of the things occurred and when they became apparent to you and what was commented on and what was not.

A. Okay.

Q. And do I understand your evidence that prior to your experience as team leader on 4A beginning in June, your experience with death in the cardiology ward at the Hospital was one death had occurred while you were on duty?

A. Right.

Q. There were two resuscitation efforts; one was successful and one was unsuccessful?

A. Right.

Q. And that while you weren't on duty there were five or six deaths in the one and a half years that you were on 5A that you heard about from others?

A. Well, I wasn't sure of the number. I just know that there were --

Q. I appreciate that. You said



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five or six.

3

A. Okay.

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Q. So would it be fair to say that your experience with death on the ward prior to moving down to Ward 4A was that death was not a particularly common occurrence?

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A. Right.

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Q. Now if we go back and look at the first five months of this period that we are considering here (that is from the end of June through to the end of November) you indicated that you were at this point learning the ropes as a team leader.

13

A. Yes.

14

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Q. Essentially feeling your way along with the new responsibilities that you had as a team leader?

16

A. Right.

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Q. Would it be fair to say that by the end of this first five months (this is the end of June through to November) you must have been feeling a little overwhelmed by the experience that you had had as a team leader in those five months?

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A. Just by being a team leader?

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Q. Well, in that position things had not really gone ideally for you or even particularly



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well during that five months, had they?

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A. Well, we had some deaths; we had the cardiac arrests.

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Q. Well, there were quite a few deaths in that period. As a matter of fact looking at the WIN sheets, which is Exhibit 335, Mr. Commissioner - I don't know if the witness has a copy of this; perhaps it is not necessary - but on my count using Exhibit 335 between the end of June and the end of November you had worked a total of 24 long night shifts in that five-month period.

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Now I don't suppose that you counted them or are able to confirm that, but that is my count. We can count them if you want but you can take it from me --

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A. Okay.

Q. And if anyone disputes that, we will enter into a counting exercise. But in those 24 long night shifts that you had worked in that five-month period, again looking at an exhibit, and this is Exhibit 383, Mr. Lamek's chart, there appears to have been ten deaths on the 24 long night shifts, and those were Bilodeau, Taylor, Dawson, Hoos, Turner, Monteith, Velasquez, Gage, McKeil and Lutes.

THE COMMISSIONER: I think if anything



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2 you are understating it because there were other
3 deaths in that period.

4 MR. HUNT: I was going to point out
5 that in addition there had been Baby Woodcock who on
6 the long night shift of June 29th took a turn for the
7 worse at six o'clock in the morning and then subse-
8 quently died at 9:40. That is in addition to the ten
9 that actually died on the long night shifts.

10 Q. Then I believe in addition
11 you had the misfortune to be working the day shift on
12 October 19th when Baby Adamo died at 4:15 in the
13 afternoon. So in those five months of the 29 Category
14 A and B babies that we are concerned with here you
15 were either on duty when 12 died or began their
16 terminal event and died subsequently.

17 Now in addition to that, and I am
18 referring now to the Category C babies, there were I
19 believe three Category C deaths while you were on
20 duty, those being Baby Shrum -- I'm sorry, those were
21 Baby Perreault, Murphy and Volk, and you were on
22 duty at the time that Baby Shrum commenced her
23 terminal event and she died shortly after your shift
24 ended.

25 So essentially in that five months
we have, taking all that into account, a grand total



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2 of fourteen deaths while you were on duty and two
3 where you were on duty at the commencement of the
4 terminal event. And that given your prior experience
5 with death before moving down to Ward 4A is about,
6 well, you had one and now you have fourteen, so you
7 have a tremendous increase, fourteen times the number
8 of deaths that you had in the prior one and a half
9 years, and I am suggesting to you surely that fact
10 alone would have left you feeling a little over-
whelmed by the end of November.

11 A. Well, the deaths were upsetting.
12 I remember feeling exhausted in August after the
13 Saturday night. That was after Paul Murphy and Baby
14 Velasquez had died. I don't know what I was feeling
at the end of November.

15 Q. Well, in addition just the
16 actual fact of the deaths, the stress that was created
17 by those deaths during that period affected people
18 on the ward to the point where by October there had
19 been discussion about splitting up the team and about
20 getting psychiatric counselling for the nurses, was
there not?

21 A. I remember the psychiatric
22 counselling. I don't know when it was suggested, but
23 I can't recall splitting up the team.
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Q. You don't recall any suggestion about that?

A. I can recall that it was done after Susan Nelles was arrested, but today I can't remember them wanting to split the team up before that.

Q. I am referring to Exhibit 301, which is the Ward 4B meeting book. I don't know, do you have a copy of that?

A. No, I don't.

Q. I note here on page 8 - I think you have it open there in front of you - October 23rd there is a meeting, and at the top appears listed the people present, Karen, Shirley Ann, Meredith, Mary, Mary Cooney, Gloria Jane, Phyllis and somebody's name that I can't make out, and it starts off, the note of this particular meeting:

"Karen Powers started by saying that we need support and that we don't need our team to break up."

Now do you recall being present at the meeting in October when there was some discussion about breaking up your team?

A. No, I don't.

Q. Well, does it surprise you to know that we have heard evidence from a number of



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others as well with respect to the fact that there was apparently in the fall, in October for sure, discussion about splitting up the team?

A. I can recall them wanting to split up the team, but I don't recall it being in October. I thought it was much later than that. And I do remember them talking about splitting the team up after Susan Nelles had been arrested.

Q. As a matter of fact Miss Costello indicated that, and I am referring to Volume 96, page 1519 to page 1521, Mr. Commissioner, that the matter of splitting up the team had been raised before October, but certainly by October and at the October 23rd meeting it was discussed.

Does this come as a surprise to you that people were discussing splitting your team as early as September, October 1980?

A. No. I have heard the evidence before. I'm not surprised.

Q. You just don't have any recollection of it?

A. Right.

Q. So you are not disputing it as such but you just don't recall it?

A. Right.



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Q. Well, certainly at the time, assuming you were aware of it, that would be a rather disconcerting thought I would think that you on your first assignment as team leader, several months into it, people were talking about splitting up your team?

A. I never really thought about it in that term - in those terms.



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Q. Well, do you remember a conversation about the same time that your team seemed to be jinxed and that there were others who didn't want to be on your team because of that feeling?

A. I can remember that but I don't know when it was.

Q. Well, if I suggested to you it was about the same time as the conversations that you have been referring to about splitting of the team, does that assist you?

A. No, only that I can recall the conversation but I don't know when it was though.

Q. Well, again, you are not disputing any evidence that that is when it occurred?

A. I'm not disputing it with you, no.

Q. You just don't recall?

A. Right.

Q. All right. And at the same time there was discussion about the possibility of obtaining psychiatric counselling for the nurses on your team and on the ward generally because of the stress created by the number of deaths?

A. Yes.



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Q. And I am suggesting to you that these facts, two or three months into your assignment as team leader, concern over splitting up your team, concern about getting psychiatric counselling for the nurses on your team and others wouldn't have at that time been a very happy realization for you, that this was being discussed?

A. No, I think the suggestion for the psychiatric counselling was to help parents along with patients and the nursing, to deal with the death and dying with any other problems that we had on the floor. The Intensive Care Unit has a regular meeting weekly with a psychiatrist to sit down and talk, so, it wasn't unusual.

Q. Well, the point that I'm getting at is, even as early as September/October in your first reign as team leader things were not going particularly well inasmuch as there was discussion about breaking your team up because of deaths, people felt it was jinxed and didn't want to be part of the team and there was felt to be a need to get psychiatric counselling for people again because of the stress?

A. I didn't perceive that as being something negative.



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Q. Well, certainly that's not the way you had envisaged your first term as team leader would go, was it?

A. No.

Q. Not the way you would choose if you had a choice as to how it would go?

A. No, that's right.

Q. Now, in addition to that in November you had an evaluation, and I'm referring to Exhibit 373 which is the evaluation report. It revealed that there were several important areas where your team leadership abilities needed improvement. I don't mean that in any derogatory sense, you were feeling your way along at this point and there were areas where it was pointed out to you, critical areas that you needed improving upon?

A. Right.

Q. And one of them was, as noted -- do you have that exhibit by the way?

A. No, I don't.

Q. Exhibit 373. Just looking at the first page, I guess it is actually the second page, the first one doesn't have any notes on it. You required improvement in the area of maturity and professionalism in handling critical situations.



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Now, what was meant by that maturity and professional-
ism?

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A. I'm not sure what the reasons
were that Liz gave for that.

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Q. What was meant by that, by
the two terms; aside for the reasons for it, what
was meant?

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A. I'm not sure really, I can't
remember right now.

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Q. Well, that would have been
something you would have been pretty interested in
at that time in improving, in that particular area,
wouldn't it?

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A. Well, it was an area of
improvement that Liz saw that I needed.

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Q. That was certainly of interest
to you?

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A. In retrospect it could have
been something to do with the leadership skills
or the abilities that I had at the time in
co-ordinating everything.

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Q. Well, that sounds more like
the second item of inter-personal skills and
communicating with team members. But if you don't
recall what maturity and professionalism related to

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then don't speculate on it. Is that your position,
that you don't recall what that meant?

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A. Right.

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Q. Well then, the second area was
improving inter-personal skills and communication
with the team members. I take it that you would
agree that is a particularly critical area for a
team leader to develop?

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A. Yes.

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Q. And you needed to improve
your calmness in critical situations and put more
trust in your team members' performance. Do you
know what was meant by Mrs. Radojewski with respect
to that comment about improving your calmness?

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A. I'm not sure if she thought
that it was just maybe over-reacting or getting very
nervous in critical situations.

Q. Did you see that as a problem?
You appear very calm to me and I just wondered
whether there was some reason why she was commenting
on your calmness in critical situations?

A. I don't know, maybe it was
something to do with the critical situations or
the emergencies.

Q. Well, the final and important



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area where your team leadership ability was deficient and needed improving at that time was accepting input from team members. That was an area that you recognized as something you had to work on?

A. Yes.

Q. So, I suggest that at the end of this evaluation in November it would have been apparent to you that if you were to become a successful team leader then you had a lot of work to do and in some fairly critical areas in terms of improving your abilities?

A. Well, I think that's what the whole point of the evaluation is though.

Q. No question about it. But you would agree with me, that's the sense that you had at the end of November that in terms of improving your abilities you had a lot of work to do in some fairly critical areas?

A. Right.

Q. Now, to top it all off during this period of time you have indicated that you were having problems feeling intimidated by one of the nurses on your team, that being Susan Nelles, and she was a person whom I think you have indicated you recognized as a bright, confident, dedicated nurse?



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A. Right.

Q. So, what I am suggesting to you, ma'am, is that as of the end of November your transition to team leader and your experience as a team leader had neither been particularly smooth nor particularly successful over this period of time?

A. Well, there were problems.

Q. You were off to a bit of a rocky start.

A. Yes.

Q. Now, you told my friend Mr. Thomson when he was examining you in chief, and I'm referring to Volume 129, page 16, Mr. Commissioner, line 7/15 that you thought that the team worked effectively together.

A. Yes.

Q. Now, in light of everything that happened in that first five months, the tremendous increase in the number of deaths, the talk of breaking up your team, the problems you were having in certain critical areas as a team leader, what did you feel was particularly effective about the record your team had up to the end of November?

A. That we were a team that cared. Being the new team leader I knew there was going to



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2 be problems, I knew there was adjustments to make.
3 We worked effectively together. The team members
4 seemed, with the exception of Susan Nelles, weren't
5 complaining.

6 Q. Well, you say you worked
7 effectively together but I am suggesting to you that
8 the record that your team had from the end of June
9 through to the end of November probably fairly could
10 be described as a fairly disastrous one in terms
11 of the events that occurred?

12 A. Well, because of those though
13 the arrests and the emergency situations there
14 was a closeness brought to our team that we could
15 depend on each other and we knew what each other
16 was capable of doing and which they weren't capable
17 of doing. So, there was a bond of trust.
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Q. So certainly we agree there
were others who did not want to become part of this
team?

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A. From the other side?

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Q. Right.

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A. Yes.

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Q. Now you told Mr. Lamek that
as of the end of August, during this period, there
were certain things that you have no recognition of,
and I am referring to Volume 129, pages 175-176. I
think you indicated you had no recognition that the
deaths in July and August had almost entirely taken
place while your team was on duty?

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A. Right.

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Q. You don't think that at that
time you had made any observation that many of these
deaths were occurring in the early morning?

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A. Right.

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Q. You had not observed that there
had only -- that there had not been any deaths that
you had been present for -- I'm sorry, that you had
not been present for?

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A. Right.

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Q. And did not observe that many
of these deaths were deaths of patients that were under

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1
CC2 2 the care of Susan Nelles?

3 A. Right.

4 Q. Now from June 20th through
5 to August 23, which was when you worked your last
6 shift before going on your honeymoon, and again I am
7 using the WIN sheets, Exhibit 335, as the source of
8 this information, Mrs. Trayner, you had worked in that
9 period of a little under two months a total of only
10 15 nights and of those 15 nights you had seven of the
11 deaths we are concerned about, and Baby Woodcock who
12 began her terminal events during the night shift and
died shortly after the commencement of the day shift.

13 Now in that short period of time
14 from June 29th to August 23rd, the seven deaths that
15 you have been confronted with, were as many as you
16 had even heard about in the whole year and a half that
you had been working on Ward 5A?

17 A. Yes.

18 Q. And I am saying to you, given
19 that those all happened in the short space of 15
20 nights during that period, how could you not by that
21 point in time have been aware of the extraordinary
22 pattern in deaths that was occurring in the presence
of your team in the early morning hours?

23 A. Because we didn't see them as
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2 seven deaths, we saw them as one child dying and we
3 dealt with it as one child, one death and one family.

4 Q. But surely you must have
5 recognized it was when you were going home in the
6 morning that you were having to wrestle with these
7 feelings that this would bring about?

8 A. Well, we dealt with them as
9 one. Looking back now and looking at a chart, you
10 know it is very easy to say that, yes, we had this
11 many in two or three months but at the time we dealt
12 with one child.

13 Q. Well the troublesome point
14 is, Mrs. Trayner, there were others who had picked up
15 on this certainly in that time, and I am referring to
16 evidence we have heard here, and I can give you the
17 chapter and verse if you wish, from Carol Browne,
18 who realized that by August; Mary Costello, who
19 became aware during July and August; Bertha Bell,
20 who was aware of this in July; Mrs. Coulson and Miss
21 Johnstone, who were aware in July, and Mrs. Scott,
22 who was aware of it by the end of August. Other
23 people, even people on your own team, were becoming
24 aware of the fact that the deaths were occurring in
25 the presence of your team in the early hours of the
morning by this point in time.



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MR. THOMSON: Excuse me, Mr.

Commissioner, is my friend asking a question or
arguing? This is argument. That is not a question.

THE COMMISSIONER: I think it is a
question. The question contained in that is why were
you not --

MR. HUNT: I lifted my voice a little
bit at the end.

A. I think it is probably a lot
easier to look at a problem from the outside and we,
myself, the team, we were the ones that were dealing
with these children. We knew them from day one and
we knew them up until their terminal events, or until
their deaths. The supervisors, Kathy Coulson, they
would be onlookers looking in. I would venture to
say that people that do that can be far more objective
than people that are working right in the middle of it.

Q. Sui Scott was in the middle
of it; she was a member of your team and she had
recognized by the end of August that deaths were
happening while your team was on duty. She indicated
to us, and I am referring to Volume 118, pages 6790-
6793, that by the time you had returned from your
honeymoon, which was a few weeks into September,
everybody was aware of what was happening because of all



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the remarks about the bad luck, et cetera. So she was someone who was right in the centre of it and it didn't seem to prevent her from becoming aware of it.

A. She is probably more astute than I was, more clever.

Q. She was more astute than you were?

A. Yes.

Q. Well surely you would, even as a new team leader, you would have been feeling your way along during this period of time interested in learning the ropes of this new position. You would have been keenly interested, would you not, during the summer in this increase in deaths and it would have a tremendous impact on you in that position?

A. What is the question?

Q. Surely you were keenly interested as a new team leader in the increase of deaths, what was happening, why was it happening?

A. Well we knew there was death on the floor, yes.

Q. Were you not replaying the events in your mind when you would go home from one of these deaths and searching for the answer as to what happened, who did what, what you did, was everything



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done properly?

A. At the very beginning, yes, there was, there was questions, but we asked the appropriate people for it, and that would be either immediately after the death, or two to three days on our return back we would ask the questions.

Q. I am not directing my question to the fact that you asked other people. I am saying that you yourself, when you left, were you not replaying these events in your mind, looking for the reason, looking for the whys and what happened, checking to make sure you had done everything that you could, examining the role of others to make sure that they had done everything they could? Isn't that the way you reacted when you left the Hospital on a morning after somebody had died the night before?

A. On some of them, yes.

Q. Some of them. Wouldn't it happen on all of them?

A. Up until August are you talking?

Q. Sure, when you were there for them. This is only a couple of months when you were developing yourself as a team leader.

A. The first couple of arrests were horrendous and they were very unorganized. There



1
CC7 2 I can remember going home in the morning and wondering
3 after the first two or three, wondering did we do
4 everything; did we get the team there on time; were
5 we organized when the arrest was called; were the
6 medications drawn up on time.

7 Q. And you replayed the events
8 in your mind as you were wondering?

9 A. For the first few, yes.

10 Q. Well you really only have
11 any recollection at all, over this first two months,
12 of the arrest of Baby Dawson where there was a Code 23/
13 25 dispute?

14 A. Yes.

15 Q. And other than that, essentially
16 your recollection of any of those deaths in that
17 period up until you went on your holidays is virtually
18 nil. My question to you is, someone who was keenly
19 interested in what was going on, someone who was
20 going over these events in your mind, looking for a
21 clue, how is that you can now recall nothing about
22 them?

23 A. Well it's three and a half
24 years later, almost four.

25 Q. These were events that had
tremendous impact on you, as you have already said?



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A. Well yes they do, but a lot has happened in three and a half years; there is no reason to continually rehash it and to make a note of it and to remember it.

Q. It wasn't your practice to continually rehash these deaths?

A. Well they would be discussed until -- if we could not talk to the doctor at the time that the child had died, that may be two, three, or four days later before we would be able to talk to the cardiologists and then it would be talked about again. It is four years now. I can't tell you how I felt like three and a half years ago or what I was feeling.

Q. Do you think that the events themselves were so unpleasant that you have tried to block them out of your mind, or is it just the passage of time that has left you with your present state of recollection?

A. I think it is the passing of time.

Q. Let me ask you this: If we move ahead three months to the end of November, after your break for your honeymoon, September, October and November, had you recognized by that time the pattern



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of deaths in the presence of your team in the early morning hours?

A. No I hadn't.

Q. During that period of time, according to the WIN sheets, you had worked an additional nine nights of long night shifts and on those nine shifts there had been three more Category A and B deaths - those are Babies Gage, McKeil and Lutes. Baby Adamo, as we have discussed, died in the afternoon shift that you also were working on. Now the total that we have to that point, as I referred to, in 24 nights we have 10 A and B deaths and you have only a recollection of Dawson up to the end of August and in the interim, the three months through to the end of November, the only baby that you have any recollection of is Adamo. That was the situation you described where you were inserting the nasogastric tube and there was some concern whether that had contributed in any way to the cause of death?

A. I thought I remembered something about Brian Gage. Do you have the list?

Q. I am referring to Volume 129, page 175, your recollection with respect to Brian Gage, in my reading of it, and this is your evidence



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CC10 2 of what --

3 MR. THOMSON: The witness asked if
4 she could have a copy of Exhibit 383.

5 MR. HUNT: Oh.

6 Q. Do you not have Exhibit 383
7 in front of you?

8 A. No, I don't.

9 Q. I am sorry.

10 THE COMMISSIONER: What was the
11 page for Gage?

12 MR. HUNT: Beginning at about page
13 178, the witness has a very vague recollection of
14 the incidents occurring on that night.

15 Q. What I am suggesting to you,
16 ma'am, is that the significant events that you recall,
17 such as the Code 23/Code 25 dispute over Dawson and
18 the nasogastric insertion with Baby Adamo were really
19 the high points of your recollection, other than that
20 your recollection with respect to the babies is at
21 best vague.

22 A. Well I don't know what you
23 want me to remember. I remember --

24 Q. Were you as keenly interested
25 in the deaths and the increase of what was happening
on the ward during the months of September, October and



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CC11 2 November as you had been prior to that in July and
3 August?

4 A. Yes.
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Q. You told Mr. Lamek that it was only recently that you learned in the four weeks when you were absent from mid-August to mid-September that only one child, Laurette Heyworth, had died?

A. Yes.

Q. Did I get your evidence correctly that you learned this - you are not sure when you learned this? It was some time after that and it may have been before the preliminary hearing of Susan Nelles, or is it much more recent than that?

A. I thought I just found out when the Atlanta Report came out.

Q. All right, so --

A. Now it may have been mentioned earlier and I didn't think too much of it, but it was when the Atlanta Report came out that I realized that there was a death.

Q. All right. Now your only conscious recollection now puts the first time you heard about that considerably later than the events of the preliminary hearing; within the last year, a little more than a year?

A. I think so.

Q. All right. Were you surprised when you heard that?



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A. Well, I guess I had been told all along from the police that we went through similar fact evidence, and I hadn't heard that there was a death in between the time I had left and gone back to work.

Q. And I think you indicated that you hadn't phoned the hospital while you were away to see how things were going?

A. Well, I said I had called the hospital one day to let them know about a girl that had just had a baby.

Q. You didn't phone to ask them how things were going in terms of this tremendous --

A. No, I didn't.

Q. -- increase in deaths that had been experienced in July and August?

A. No.

Q. You didn't ask anybody about it on your first night back?

A. No.

Q. And indeed I think you said no one commented on it to you?

A. Not until Liz Radojewski made a comment that "your first night back".

Q. Well, do I take it from that



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1
2 that while you were keenly interested in what was
3 happening in this situation you had been put into as
4 team leader that your interest didn't go so far as to
5 get you asking questions about it and keeping abreast
6 of what was happening?
7 A. You mean from after I was on
8 holiday?
9 Q. While you were away.
10 A. There is no need to. I was away.
11 The hospital ran without me there, and I don't need to
12 know what went on when I was gone.
13 Q. But you left on the 24th of
14 August and you told Mr. Lamek you were awfully tired
15 and you felt that you couldn't go on.
16 A. Right.
17 Q. You felt you couldn't go on?
18 A. Hm-mm.
19 Q. Had you ever felt that way about
20 your nursing job before that night?
21 A. No. I was exhausted.
22 Q. You felt you couldn't go on; you
23 took the holiday and you say there was no need for you
24 to check back to see whether anything had changed?
25 A. That's right. Saturday night was
a very unusual night, though. We had two - one older



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boy died and one baby died. I was tired.

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Q. But it wasn't just the Saturday night that left you feeling that way. Surely it was the events of the preceding six or eight weeks from the end of June culminating in a Saturday night when two babies died?

A. They may have, but it was the death of those two children that I felt awfully tired.

Q. You felt that you couldn't go on, and in any event you made no enquiries while you were away or before you came back or as you came back to see if the situation as had prevailed in the summer were still continuing?

A. No, I didn't.

Q. Well again, now just looking at the WIN sheets, Exhibit 355 and Exhibit 383, did you know in that period in the summer that after the long night shift of July 31st ending in the morning of August 1st, which was the shift on which Baby Turner died at 2:15 in the morning, that you didn't work nights again until August 18th when you came back in for your first night shift and that that was the shift on which Baby Monteith died at 4:45 in the early morning of August 19th. Now that was a period of almost three weeks.



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DD 5 Now did you know at any time that during that period of three weeks in August when you didn't work nights there were no nighttime deaths at all?

A. I don't know if I made that assumption or that realization.

Q. Well, did anyone mention that to you, any of the supervisors? Did the head nurse mention that to you that --

A. No.

Q. -- gee, we haven't had any of these deaths at night?

A. Not that I can recall.

Q. For the last three weeks?

A. Not that I can recall, no.

Q. Well, did you know, again, that when you finished working the long night shift on the morning of October 15th which was the shift on which Baby McKeil died at 4:27 that you didn't work the night shift again until November 10th which is a period of approximately three and a half weeks?

A. Hm-mm.

Q. Did anyone mention to you or point out to you that in that period of time there hadn't been any nighttime deaths either?



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A. No, not that I can recall.

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Q. The next one after you returned

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to nights was on your last night shift and that was

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the very first week when you were back on nights and

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that was Baby Lutes that died in the early morning of
the 17th of November.

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Did anyone draw to your attention at

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that point in time the fact that during this break of

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three and a half weeks when you and your team was off

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there were no night deaths?

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A. No.

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Q. Was it ever mentioned that after

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you finished work on the long night shift on November

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17th (that would be on the early morning of the 17th

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which again was the shift as I have noted on which

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Baby Lutes died) that you didn't work the night shift

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again until December 8th which again is a period of

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three weeks, and that was the shift on which Baby

Onofre died in the early morning hours of December 9th?

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Did anyone draw to your attention at

20

that point in time that again during this block of

21

time when you weren't in there on nights there had

been no nighttime deaths?

22

A. No.

23

Q. Did you come to that realization

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yourself at any point in time during this period?

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A. No, I didn't.

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A. Well, I don't think any hospital ward is happy at Christmastime.

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Q. There is very sick children; it is very sad for the parents and for the people who have to deal with them?

13

A. Right.

14

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Q. And during this month of December was it your experience or did you get a feel for whether or not what is sometimes referred to as the Christmas depression was evident on the ward? You know what I am referring to by the Christmas depression?

19

A. No.

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Q. The recognized state that exists in certain people around Christmas where they become very depressed over the whole state of affairs because of the memories that people have at that time about their childhood. Did you notice that in evidence on



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the ward over Christmas?

A. No.

Q. There were five deaths during the month of December, and this was a dramatic increase in what we see in the months of September, October, November. We had Baby Onofre on December 8th, Baby MacDonald on December 13th, Baby Gosselin on December 18th, Baby Lombardo on the 23rd, and Baby Belanger on the 28th.

Now all these babies died on the long night shift although Baby Belanger began his critical event during the long day shift of the 28th and then subsequently - when you were working on the long day shift - and subsequently died on the night shift.

A. Right.

Q. You were present for four of the nighttime deaths in December and for the onset of Baby Belanger's terminal events.

Now I would think that that series of events during the month of December, that number of deaths, would have certainly made for a very unpleasant, an even more unpleasant Christmas season on the ward.

A. I didn't notice anything that was striking. I know we were upset after the deaths.

Q. It certainly wasn't conducive to



DD 9

1
2 any kind of Christmas cheer or party type spirit, was
3 it?

4 A. I don't know. I really don't
5 know how to answer that.

6 Q. Well, poor Baby Belanger died in
7 the early morning hours of December 23rd. Now that is
8 just two days before Christmas. Now I suggest that
9 that event must have been a particularly sad --

10 MR. STRATHY: Lombardo?

11 MR. HUNT: Q. I am sorry, Baby
12 Lombardo. That's quite right. Baby Lombardo. I
13 suggest that event must have been a particularly sad
14 and traumatic experience for everybody?

15 A. I really don't remember the baby,
16 Lombardo.

17 Q. No?

18 A. I can't recall what the feelings
19 were on the floor at that time.

20 Q. Well, I know you can't recall the
21 baby Lombardo, and I guess that is what I am getting
22 to. Have you ever had a baby die before so shortly
23 before Christmas?

24 A. There was somebody up on the fifth
25 floor I think that had died around Christmastime.

Q. Is that the one you were on for?



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A. No.

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Q. Have you ever been on duty when a baby died so shortly before Christmas other than Lombardo?

5

A. I don't think so.

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Q. I have no doubt that the parents of Baby Lombardo were people who visited the baby and were planning to be there for Christmas and over the Christmas season.

10

11

A. I really can't remember this baby. From reading the chart --

12

13

Q. I appreciate that. I guess --
MR. THOMPSON: Would you let her finish?

14

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MR. HUNT: Q. Oh, I am sorry.

16

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A. From reading the chart I thought the child was just transferred up from the Intensive Care Unit. I don't know if the parents were really known to 4A at all.

19

20

Q. We have heard that on the night of Baby Lombardo's death the staff was reduced.

21

22

A. Yes.

23

24

Q. There was you and Nurse Ganassin covering 4A?

25

A. Right.



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Q. The ward population was small?

3

A. Yes.

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Q. Only eight patients?

5

A. Yes.

6

Q. Right? Nurse Ganassin had six
of those eight patients?

7

A. Right.

8

Q. You had two?

9

A. Okay. I don't have the assignment
book here so I am just --

10

11

Q. I am taking this from your
evidence, Volume 130, page 264, and one of the two
that you had was Stephanie Lombardo.

12

13

14

A. That I was responsible for
Lombardo?

15

Q. Yes.

16

17

A. I don't remember being responsible.
I thought Gloria Ganassin was responsible for Lombardo.
Miss Ganassin was.

18

19

THE COMMISSIONER: We had better check
it I think.

20

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MR. HUNT: Q. I stand corrected. She
was responsible for Lombardo. So we have a small ward
population of eight patients. Ganassin is responsible
for Lombardo. You had two patients you were responsible



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Trayner, cr.ex.
(Hunt)

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for.

A. If that is what it says.

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Q. You were the team leader on
4A that night?

4

A. Right.

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6

Q. So, your contact with Lombardo
was as a general supervisory role as the team leader?

7

A. Right.

8

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Q. All right. Now, given that
what we have here was the tragic death of a child
shortly before Christmas on the night when the ward
population was down, indeed, you and another nurse
were responsible for only eight patients, how can
you have no recollection of Baby Lombardo?

13

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A. I'm really sorry, I don't
have a recollection of that baby at all.

15

Q. No recollection at all?

16

A. No.

17

Q. You can't even picture the
baby?

18

A. No, I can't.

19

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Q. Well, is it like a memory gap,
do you just have no recollection of anything in that
period of time to deal with Baby Lombardo or is it
just something that you have forgotten?

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A. I can remember little bits
about Jesse Belanger, that baby on December 28th.



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I can't remember, there was no reason for me to remember that night.

Q. Other than the snatches of memory that you have about Baby Lombardo, am I right that you really have virtually no recollection about the deaths in December at all?

A. That would be correct.

Q. So, I am saying to you, is it a feeling, like, at one time you knew about it but you just can't recall from the passage of time or do you just have a sense that there is a gap there in your memory that for some reason there is nothing?

A. I am sure I probably remembered it at that time but it is three years later, there was no reason for me to remember this, no reason for me to take notes or to save that at the back of my mind or my memory.

Q. Surely the death of a little baby so shortly before Christmas is the sort of traumatic event that once you are exposed to it you don't soon forget it?

A. I can't remember that baby at all, I have no recollection.

MR. HUNT: I was going to move into another area.



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THE COMMISSIONER: Yes, all right,
we will take 20 minutes then.

--- Short recess.

--- Upon resuming.

THE COMMISSIONER: Yes, Mr. Hunt.

MR. HUNT: Thank you.

Q. Mrs. Trayner, we had got to
the end of December. Now, you told Mr. Lamek that
as at the end of December of 1980 you still had made
no observation, you yourself had made no observation
as to the fact that your team was present on the
floor when the deaths were occurring and you had made
no observation with respect to the number of children
that had died between 1 o'clock and 4 o'clock in
the morning.

A. Right.

Q. That's up to the end of
December. Now, again, Exhibit 335 indicates that
up to that time, that's the end of December, you
had worked a total of 33 nights. As we have seen
there were 14 of the Category A and B deaths we
are concerned with here on those nights plus Baby
Woodcock who had commenced the terminal event during
the night shift.

Now, you have indicated you didn't



1
2 recognize the pattern notwithstanding that and you
3 told Mr. Lamek that you had no reaction to the deaths
4 in December. Now, do I take it that you had no
5 feeling at all at that time about the state of deaths
6 during the month of December?

7 A. I think I said that I had no
8 recollection of them.

9 Q. Well, we can check that.

10 A. I don't understand what your
11 question is really though.

12 Q. Page 280 of Volume 130:

13 "Q. Do you recall having any
14 reaction to the number of deaths that
15 occurred in December?

16 A. In the summer or in the --

17 Q. In December I said. I'm sorry.

18 A. No."

19 Now, perhaps that should be clarified.
20 Were you saying to Mr. Lamek that you had no
21 recollection of any reaction to the deaths in
22 December or that you had no reaction at all?

23 A. I think I had no recollection
24 to the reaction of the deaths.

25 THE COMMISSIONER: No recollection
of a reaction, is that what you mean?



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THE WITNESS: I'm sorry?

THE COMMISSIONER: Recollection of a reaction. I also have the same note 'I had no reaction to the number of deaths in December'. But I wonder, what page is that on?

MR. HUNT: That's at page 280 of 130, Mr. Commissioner, about line 18.

Q. Now, in fairness, the question was:

"Q. Do you recall having any reaction to the number of deaths that occurred in December?"

And the answer is:

"A. No."

And then it continues over onto page 281 with a question that ended with:

"You were the person there, though, who was present for all of the deaths on your ward, but they made no impression in terms of 'we are back into a period of a large number of deaths'?"

A. No, it didn't."

Which suggests at that time there was simply no impression on you that you had got into a spate of deaths that recalled the increase in the summer?



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A. That would be correct.

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THE COMMISSIONER: Well, I'm not
sure I know what that means. What would be correct?
You say it in your own words.

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THE WITNESS: Taking from what was
read I would assume that the question was 'Did I have
any recollection to any reaction to these baby deaths'?

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THE COMMISSIONER: Well, the only
reaction that I think Mr. Lamek was concerned with
was, did you appreciate that there was another
cluster or spate or whatever of deaths in December
similar to the cluster that you had in the summer.
That didn't impress you?

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THE WITNESS: No.

THE COMMISSIONER: Well then, I
think the note I have got is correct.

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MR. HUNT: Yes, sir, on that under-
standing it is.

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THE COMMISSIONER: That is the number
of deaths did not, let's say, impress you. I know
that each death is a death and has a concern but
the number of deaths didn't strike you as, didn't
give you any particular concern?

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THE WITNESS: No.

THE COMMISSIONER: At that time?



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2 THE WITNESS: No.

3 THE COMMISSIONER: Yes, all right.

4 MR. HUNT: Q. Mrs. Trayner, in
5 January, of course, we have heard that Baby Estrella
6 died in the early morning of January 11th and you
7 worked, again according to the WIN sheets, Exhibit
8 335 three long night shifts after that death; that
9 was on the 11th, 14th and the 15th and after the
10 long night shift of the 15th you didn't work again
11 on the long night shift until the Monday, February
12 2nd. Again, there were no other deaths on the long
13 night shift during that period of time and I take it
14 that you have no recollection of that being drawn
15 to your attention in February when you returned?

16 A. No, I didn't.

17 Q. All right. Now, in February
18 you worked on the long night shift on February 2nd
19 and 3rd and again on February 11th and 12th. We have
20 Baby Fazio dying on the long night shift of February
21 3rd, that is, in the early morning of February 4th
22 and Baby Thomas dying on the long night shift on
23 February 11th, that is, on the early morning of
24 February the 12th. Other than that, there were no
25 Category A and B deaths at night during the month of
February.



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2 Again, I ask you, did you know, was
3 it drawn to your attention by anyone, that during
4 that month again when you weren't working on the
5 long night shift they weren't experiencing any deaths?

6 A. I don't recall them saying
7 anything like that, no.

8 Q. Did you come to that realization
9 yourself at that point in time that again in that
10 month when you weren't working nights there were no
11 deaths?

12 A. I came to that realization
13 some time - I know for sure it was with Baby Pacsai.

14 Q. All right.

15 A. I can't remember if it was in
16 February or if it was earlier in March, but I do
17 remember speaking to a doctor about the children
18 dying at night.

19 Q. I think you have explained
20 that and I think your recollection is correct that
21 you said that that was around the time of Baby
22 Pacsai and Baby Inwood dying.

23 A. Right.

24 Q. Well, all right, after working
25 those night shifts in February according to the
WIN sheets the first night shift that you worked



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2 after February 12th was on March 6th and that was the
3 long night shift on which Baby Warner died in the
4 early morning hours of March 7th.

5 Now, again, in that three week period
6 between February 12th and March 6th there were no
7 Category A and B deaths. I guess this is getting
8 into the area now of the time when it may have dawned
9 on you that when you weren't working nights there
10 were no nighttime deaths?

11 A. Right.

12 Q. Do you recall that fact being
13 drawn to your attention by anybody when you got in
14 to work on March 6th that, gee, we've had three weeks
15 again when you weren't on nights and there weren't
16 any more deaths?

17 A. No.

18 Q. Well, all right, you worked
19 in March long night shifts on the 6th, 7th and 8th
20 and on those shifts we have the deaths of Babies
21 Warner, Hines and Gionas and then you didn't work
22 nights again until March 11th and 12th and according
23 to the chart, Exhibit 383 there were no deaths at
24 night until those two shifts, that being on the 11th
25 Manojlovich and Pacsai and on the 12th Inwood.

Now, is this the period of time



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somewhere in around Baby Hines who died on March 8th and Baby Pacsai who died the early morning of March 12th when you say that it first became something that you were aware of that babies were dying when you were there at nights?

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A. Right.

8

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Q. Okay. Was that because someone mentioned that to you or was that because you came to that conclusion yourself?

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A. I came to the conclusion myself.

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Q. Now, after working night shift on the 11th and 12th you didn't work again until the 16th, 17th, 20th and 21st and of course we have heard that Baby Gardner died on the 17th, Babies Miller and Cook on the 20th and 21st.

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Now, you indicated you became aware of the fact that when you were there at nights babies were dying; this is some time in the early part of March?

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A. Right.

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Q. Right. Did you realize that the converse of that was also in effect and that is when you weren't working on nights there were no deaths. Did that fact come to your attention either



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by being drawn to your attention or by you concluding
that?

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A. I think so, yes.

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Q. You think someone drew it to
your attention?

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A. No, I think it was my observa-
tion that these children were dying at night and
they were dying on our team.

9

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Q. Right.

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A. And that's about as far as I
took it.

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Q. All right. You didn't take
it the next step that when your team wasn't there
there weren't any deaths?

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A. I took it as far as that the
children were dying on our team.

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THE COMMISSIONER: Well, they weren't
exactly dying on your team, at least not all of them,
because certainly Hines, Manojlovich, Pacsai and
Inwood were all on 4B.

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THE WITNESS: Right. But they had
died when we were on shift.

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THE COMMISSIONER: Well, I accept
that, I accept that.

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THE WITNESS: But when I say the



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team, sir, I mean 4A and 4B's team.

THE COMMISSIONER: Yes.

THE WITNESS: Because we worked together so much that we were just one big team.

THE COMMISSIONER: Well, you are talking about not only your team but Mrs. Bell's team as well, is that right?

THE WITNESS: Right.

THE COMMISSIONER: You were taking it as one big team?

THE WITNESS: Right.

THE COMMISSIONER: Not my team but our teams, is that what you mean? Is that what you meant? Really, when people were asking you what was going on in your mind, and you may not remember what was going on in your mind, but did you have the impression that this is all happening to me and my team or did you have the impression this is all happening to us, on our teams, both you and Bertha Bell?

THE WITNESS: It would be us and our teams.

THE COMMISSIONER: Yes, all right.

MR. HUNT: Q. Certainly at that point when you connected these events and made that



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realization you realized that it was certainly in
your presence that the children were dying at
night. I take it that you weren't at that point
sufficiently familiar with when the other members
of your team had been on and when somebody had been
off for various of the deaths?



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A. Well I knew that I was present. I don't think I said this is happening only to me. It was happening to our team.

Q. No, no, but the person that you -- when this fell into place, it fell into place vis-a-vis yourself, you realized you were present for the deaths at night by March.

A. Okay.

Q. And you were not sufficiently familiar with when the other members of your team had worked to know whether everybody had been working on each of the nights that the children died, or whether some of them were not working that night for a particular reason.

A. That would be fair.

Q. Now again can you offer any explanation as to why this took almost nine months to dawn on you when others had put the facts together and seen this pattern far earlier, and we have referred to some of them here, who saw this pattern as early as the summertime and early fall?

A. I can't offer any other explanation than what I have already given you.

Q. You don't know why it took that long for this to dawn on you?



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A. I never realized it was a pattern until March. I didn't see them as being a cluster of deaths; I saw them as one death and one baby, and that is about as far as I took it.

Q. I appreciate you didn't see it as a pattern until March. That is what we have been dealing with. My question was, looking at it now, do you have any explanation that you can offer as to why it took you that long to put the facts together to see the pattern when the others around you saw it much, much earlier?

A. I wasn't looking for anything.

Q. Did you ever use the phrase "the witching hours"?

A. I don't know if I used the phrase "the witching hours", but I do recall it being said on the floor.

Q. You have heard the phrase "the witching hours"?

A. Yes.

Q. But you can't recall whether you used it?

A. No.

Q. I take it you might have used it?



Trayner
cr.ex. (Hunt)

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A. I may have, yes. I can't recall.

Q. What did it refer to as far as you were concerned?

A. The hours between 1:00 and 4:00 or 1:00 and 5:00.

Q. And what was the significance of those hours?

A. That the children were dying in the early hours of the morning.

Q. And I take it that if you recall hearing it, even though you may have used it yourself, it was a phrase that was used then by more than one member of your team or member of the two teams, yours and Bertha Bell's team, to describe these hours?

A. Yes.

Q. Do you know what the particular connotation of the "the witching hours" was in respect of those hours that the children were dying? Why was that used? What was the significance of that?

A. I don't know, just that the children were dying in between 1:00 and 4:00 and it just seemed to be a bad time for the floor.

Q. It would certainly seem that



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the persons who used that phrase had recognized the pattern?

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A. Yes.

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Q. Because the use of the phrase suggests that you have recognized there are certain hours in the night when children are taking a turn for the worse and dying?

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A. Right.
Q. Well if Janet Brownless, who has testified here, Volume 116, page 6262, indicates that she heard you refer to those hours as "the witching hours", you wouldn't disagree with that?

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A. I don't recall saying it, but I may have.

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Q. You will grant us that you may have said it? I take it then you are not prepared to disagree with her recollection that she heard you say it?

A. No, I am not.

Q. If she indicated at those pages that she heard you use that phrase "the witching hours" before the month of March, I take it you are not in a position to disagree with that?

A. Well. it would have to be some time after February.



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Q. That is March.

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A. Hm-mm.

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Q. Sometime after February would
be March?

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A. Okay. Well the end of
January into -- as I said to you, Mr. Hunt, I can't
remember when it was. I do remember that it was
after Pacsai and Inwood. Now, it could have been
before that, but I do remember speaking to one of the
doctors after Baby Inwood.

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Q. I am having some trouble with
your answer. You say you do remember that it was
after Pacsai and Inwood, which sounds pretty definite,
but then you say it could have been before that.

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A. It may have been after
Colleen Warner that I realized that it was on the
night shift, but I can't give you a specific --

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Q. Colleen Warner died on
March 7th.

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A. I can't give you a specific
date.

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Q. Sometime in the month of
March?

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A. Or February, after Frank
Fazio. I don't know.

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Q. Well I am suggesting you can't have it both ways. Either you have a distinct recollection that you realized this pattern during the month of March, and that is when it occurred, or you don't remember when you came to the realization that the kids were dying at night and in your presence.

A. Well I specifically remember after Manojlovich and Pacsai.

Q. So if Janet Brownless testified she heard you using the phrase "the witching hours" before the month of March, then that doesn't offend you; you accept that?

A. I can't dispute it. I can't --

Q. I believe you said it could have been after Fazio.--

A. Yes.

Q. -- in February, which is February the 4th.

A. I can't dispute it; I can't confirm it.

Q. But even on your own recollection you are prepared to agree that it could have been perhaps a month or more than a month earlier than March that you made this connection?

A. Yes, not much more than that,



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4 Q. Not much more?
5 A. Not much more than that.
6 Q. You have a distinct recollection
7 of that, that it is not much more than early February?
8 A. Only that I remember Babies
9 Manojlovich and Pacsai because those were two that
10 happened on the same night.
11 Q. And could it have been as
12 early as December when you had this new spate of
13 deaths at night that rivalled the deaths that
14 happened in the summertime?
15 A. No, it wouldn't have been
16 then.
17 Q. You definitely recall it
18 couldn't have been that early?
19 A. Right.
20 Q. Now we have heard from others,
21 including Susan Nelles, that the tension and the
22 conflict that existed between you started right at
23 the outset when the team came together in June. Would
24 you agree with that?
25 A. Well it would be shortly
 after Susan had joined the team, yes.
 Q. That was the 1st of June?



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A. Right.

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Q. And you agreed with Mr. Lamek,

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I think that was your evidence at the preliminary hearing which suggested that your differences of opinion with Susan Nelles continued on into 1981?

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A. Well they would be minor disagreements with things that would happen on a day-to-day basis, nothing very --

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Q. That is what creates tension and conflict between people. You are not disputing that the disagreements continued on into 1981; you said that at the preliminary hearing and you agreed with that?

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A. Okay.

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Q. Now Miss Costello and Bertha Bell have suggested that this tension that existed between you and Susan Nelles stemmed from different personalities that you and Susan had and from the fact that Susan felt equally capable of being a team leader and expressed that view. Would you agree?

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A. Well yes, I think she felt that she could be a team leader.

Q. And Carol Browne suggested that the conflict between the two of you manifested itself in difficulties that you had trusting one



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another and in you delegating authority and responsibility. Do you agree with that?

A. That would be fair, yes.

Q. Now you have explained to us, and I don't propose to go into it at any length, that you were intimidated by Susan Nelles because of the difference in your personalities.

A. Right.

Q. I think you said she was a confident, strong-willed, outspoken person?

A. Yes.

Q. And you during this period of time, were perhaps not as confident as you wanted to be?

A. Right.

Q. And in addition I think you agreed that Susan Nelles was a competent, knowledgeable nurse who cared for her patients well --

A. Yes.

Q. -- dealt with the parents well --

A. Yes.

Q. -- and was dedicated to her job?

A. Right.



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Q. As a nurse, just from your observations really, she would appear to be quite a package, would she not? I mean she had virtually everything going for her that one could ask for in a nurse?

A. Well, she was a good nurse; she was a competent nurse.

Q. Competent was only one of the expressions that you agreed with to describe her. There is a list of a number of others - knowledgeable, cared for her patients well; she dealt well with the parents and she was dedicated and she was the sort of person that didn't just regard this as the way to make a living but something that she was extremely concerned about. I am suggesting that she had virtually everything going for her that everyone could ask for in a nurse.

A. Okay. Yes.

Q. And on top of all of this, she was confident and a could-take-charge type of person and a strong-willed type of person; do you agree with that?

A. Yes.

Q. Did you feel jealous of Susan Nelles at all?



FF11

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A. No.

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Q. Well, Mrs. Trayner, doesn't -

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this may be a little test of your candor here, but

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human experience really tells us, doesn't it, that

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when we are intimidated by the qualities of a person,

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I don't mean in a physical way; I mean personality

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traits, that quite often it is because we don't

9

possess them ourselves and we are a little bit

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jealous of the fact that someone else has them; doesn't

that sound right?

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A. No. I admired some of the

12

qualities that Susan had. I wasn't jealous of her.

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Q. You would like to have those

qualities yourself?

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A. Some of them. I admired her

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outspokenness.

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Q. And her take-charge attitude

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to situations?

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A. Yes.

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Q. Well we have heard from

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Nurse Radojewski that this tense or difficult relation-

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ship between you and Susan Nelles was really unique

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to the ward in the sense there were no other two

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nurses who endured that sort of a relationship. I

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think Susan Nelles confirmed that in the sense when

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F12

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she told us that her relationship with you was the only one that led her to confront a head nurse about something. Do you agree with that?

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A. Yes.

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Q. Did you yourself get along with the other nurses without any difficulty of the type that you experienced with Susan Nelles?

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A. I believe so.

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Q. So you would confirm that this tension, this difficult relationship was unique as between you and Susan; it wasn't something you experienced with others that you were working with?

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A. Right.

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Q. And did you as well observe that Susan Nelles got along with other people outside of yourself without any difficulties, without the same sort of tension that existed between the two of you?

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A. She got along well with the members of our team and with Bertha's team.

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Q. You see, she has told the Commissioner as well that it has crossed her mind that someone might have been intentionally killing these babies under her care in order to discredit her abilities as a nurse, which we have agreed are considerable.

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A. Hm-mm.



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Q. And I think if you look at Exhibit 383, if you still have it in front of you.

A. Yes.

Q. You will see under the second column beside yours, S.N. for Susan Nelles, by virtue of the little asterisks there that she was caring for no less than 12, caring for no less than 12 of the babies when they died or began their terminal event.

A. What line are you on?

Q. The second column - I am not asking you to double check it unless you want to. I have added them up and we have heard evidence to that effect, but 12 babies under her care died suspiciously or began their terminal event while she was caring for them, and that is more than any other nurse on your team?

A. Hm-mm.

Q. For example, you yourself I think was only directly caring for one baby, Baby Gionas?

A. Right.

Q. So what I am asking you, did you in this nine month period see anything that would lead you to wonder whether any other nurse connected

Trayner, cr.ex.
(Hunt)

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with the ward might be trying to discredit Susan Nelles by killing babies under her care?

A. Did I see that at the time?

Q. Yes, at the time. Did you observe anything that caused you to wonder whether any other nurse or person connected with the ward might have the kind of animosity towards her that would lead them to do that?

A. No, I didn't even - I didn't know that 12 babies were under Susan's care. I never made that connection.

Q. Is this the first time you have seen that?

A. No, I knew about it when Mr. Lamek had brought it up, but that was all.

Q. But you can't offer us any assistance as to any observation you made about other nurses or personnel on the ward that struck you as having any kind of difficulty with Susan Nelles that might lead them to discredit her in this way?

A. No, I didn't.

Q. Mrs. Trayner, you have told us I think several times that during these months you were adjusting to your position as a team leader, that you didn't have as much confidence as you wanted



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2 to have and you were working on that, and you agreed
3 you were really feeling your way along through your
4 duties and responsibilities, and I take it that would
5 involve you asking questions of people about procedures
6 and matters involving child care?

7 A. Well, I probably asked questions
8 about hospital procedures or hospital policy.

9 Q. And if you had to, if you were
10 responsible for certain decisions involving child care
11 that came with the territory of a team leader, you
12 might check those decisions as against someone with
13 more experience to make sure that you were doing that
14 correctly?

15 A. Well, if I was concerned about
16 a baby or a child then I would have either the nurse
17 involved give her assessment or I would call over the
18 team leader from the other side.

19 Q. I am not suggesting that there
20 would be anything inappropriate for a person feeling
21 their way through --

22 A. Hm-mm.

23 Q. - this type of responsibility
24 to be checking their judgment against more experienced
25 people to make sure that you were in fact doing things
appropriately and in fact learning how to do it by



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that method?

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A. Yes.

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Q. Would that be sort of a fair

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description of how you were dealing with your day
to day responsibilities during this period of time
as you were learning?

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A. Yes, it would be.

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Q. All right. Now we have heard,

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however, evidence about a marked change in your

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behaviour when an arrest occurred. You probably have

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been made aware of some of this evidence; indeed Mr.

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Lamek dealt with Bertha Bell's complaint to Mrs.

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Costello about your taking charge of the arrest

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situations when they were on 4B, she felt she was

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really the one who was supposed to take charge.

A. Hm-mm.

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Q. We have heard from Mrs. Coulson

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that you became - this is Volume 107, page 4232,

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became quite vocal during the arrests and you would

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take over always wanting the child to go to the ICU,

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and that you liked to take over in the arrest

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situations. And indeed she indicated that your

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behaviour in these situations was a marked contrast

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to your nursing approach where you went through the

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learning experience, feeling your way along that you

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2 have described, and she described it as a very
3 aggressive approach that you took to this situation.

4 Indeed Susan Nelles told us about the
5 arrest of Baby Gage on your first night back.

6 Now can you - well, first of all, do
7 you recognize any truth in the descriptions that the
8 various people that I have summarized for you have
9 given where they described this marked change in
10 your approach and behaviour when an arrest was called?
Does that ring a familiar bell with you?

11 A. Yes.

12 Q. Can you account for this
13 seemingly dramatic surge of confidence as you had
14 when an arrest started that allowed you to step into
the role and take charge of the situation that
compelled you to do that?

15 A. I spoke to Liz Radojewski and
16 I spoke to Kathy Coulson about how to handle a
17 cardiac arrest, and I got advice from them.

18 THE COMMISSIONER: I don't know that
19 that is quite an answer to the question. Mr. Hunt
20 is suggesting that there becomes a change in that
21 when there is a cardiac arrest you are trying to
22 take over, if I understand the question properly?

23 MR. HUNT: Yes.
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2 THE COMMISSIONER: Trying to take over,
3 trying to take over even sometimes when it is not on
4 your ward, take over the resuscitation. Do you accept
5 first of all that proposition? Is it so?

6 THE WITNESS: I would have to say
7 it would be fair to say that I became more aggressive
8 later on, the end of July, the beginning of August.

9 THE COMMISSIONER: Yes, that is early
10 on. But you mean it continued from then? Is that
11 it?

12 THE WITNESS: It continued, but it was
13 during this time that I spoke to Mrs. Radojewski and
14 to Kathy Coulson.

15 I didn't perceive myself as taking
16 over on 4B side. I don't really remember being in
17 an arrest situation with Bertha Bell before October.
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MR. HUNT: Q. Yes. All right. You spoke to Kathy Coulson and Liz Radojewski about it?

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A. Right.

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Q. And they gave you some advice as to how to respond in this situation?

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A. Right.

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Q. I have described it as a marked or dramatic surge of confidence that you seemed to get when an arrest occurred that allowed you to go in and take charge.

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Now does that seem familiar to you? Does that strike a bell that you got a surge of confidence and wanted to take charge when an arrest occurred?

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Q. Did you within these situations of arrests feel that they presented you with an



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opportunity to show people that you could be a take
charge type of person?

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A. No, I never thought of it that
way. It was an emergency situation and we were
dealing with a child's life. And in dealing with
somebody's life at that time you may be quick; I may
have come across aggressive. I don't know, but that
was not my first priority. My first priority was
making sure that everything would be available for
the doctors, for the child or for the baby or for
whatever.

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Q. You indicated you didn't
perceive yourself as being aggressive and taking
charge in the 4B situations that caused Bertha Bell
to complain to Nurse Costello.

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A. Hm-mm. Yes.

Q. Of course we have heard evidence
that she obviously was upset enough about that to take
her complaint to Nurse Costello.

Does it surprise you that others
recognized offensive behaviour or behaviour on your
part they viewed to be offensive that you yourself
don't appear to have any conscious recollection of
or perception of?

A. It was an emergency situation and



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I dealt with it the best way I could.

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Q. No, my question is are you surprised that other people viewed your behaviour as offensive, categorized it as aggressive in such a way where you yourself don't appear to have any conscious recognition of acting that way?

A. I would be surprised if they found it aggressive.

Q. Apparently she certainly did because she took it to Nurse Costello. Was any child that you were ever actually involved in the resuscitation effort ever successfully resuscitated?

A. On 4A during this time?

Q. Yes. During the whole time period, 4A or 4B.

A. In the nine months you mean?

Q. Yes.

A. I don't - I don't think so.

Q. So when you say that the team functioned well --

THE COMMISSIONER: That is not true. I am sorry, I am not suggesting that that is deliberate, but Janice Estrella was resuscitated, was she not?

MR. PERCIVAL: With respect,



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Mr. Commissioner, she never arrested on the first occasion.

THE COMMISSIONER: Did she never arrest?

MR. PERCIVAL: According to her evidence. I can give you that reference.

THE COMMISSIONER: Well, maybe I have done you wrong then.

THE WITNESS: She had a respiratory arrest.

THE COMMISSIONER: Yes, did she not?

THE WITNESS: She had a respiratory arrest.

THE COMMISSIONER: That is not a cardiac arrest?

THE WITNESS: No.

THE COMMISSIONER: I see. But you did, did you not --

THE WITNESS: She remained on the floor.

THE COMMISSIONER: Yes?

THE WITNESS: She was successful for that time. She didn't actually have a cardiac arrest.

THE COMMISSIONER: Yes, I see. All right.



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MR. PERCIVAL: Mr. Commissioner, for your reference that is page 862 of the preliminary hearing.

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THE COMMISSIONER: 862. What volume would that be in?

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MR. PERCIVAL: Volume 4, Mr. Commissioner.

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MR. HUNT: I am advised by Miss Cronk that a Code 25 was called on Janice Estrella.

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THE COMMISSIONER: I have obviously missed something because that is the first time I appreciated that there was not a cardiac arrest with Janice Estrella on the 6th or whenever it was.

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MR. PERCIVAL: 862, line 22.

THE COMMISSIONER: Thank you. In any event that doesn't interest you one way or another, Mr. Hunt?

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MR. HUNT: Q. Well, with the caveat that we are uncertain as to whether there was one, you don't recall any others in all of the ones that you assisted at in this nine month period where the baby was successfully revived?

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A. No, I can't.

Q. So when you say the team functioned well in these situations I take it you are



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referring to the mechanical operations performed by
the team in attempting to resuscitate the child?

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A. Yes.

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Q. Did you ever - inasmuch as none
of the children with the caveat of Estrella were ever
revived, did you at some point get a feeling that at
these arrests the child was not likely to be revived
anyway and that the resuscitation effort itself was
going to be of little consequence?

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A. No, I don't think I ever came to
that conclusion.

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HH/BB/ko

Q. You mean time after time after time you were going through these arrests and really there was no success?

A. Well, that would be right, yes.

Q. And I am saying to you --

A. That every child was different, every arrest was different.

Q. But you coming into that situation with so little experience in resuscitation efforts, I think you said there were only two that you were involved in prior to that, prior to June?

A. Yes.

Q. And then confronted with a long series of deaths where there were resuscitation efforts made, the child was never successfully revived with the exception of Estrella in January and my question is, didn't it at some point in time strike you that these efforts were really of little consequence, you weren't going to be successful, very unlikely anything was going to come of it?

A. No, it didn't.

Q. Well, did you feel less pressure during these resuscitation efforts as time went on, you saw, in addition to becoming familiar with the procedures, you saw that really what was done had



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little consequence in terms of the success?

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A. No, I didn't see it as that
either.

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MR. HUNT: I am going to move to
another area now, Mr. Commissioner.

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THE COMMISSIONER: Yes, all right.
Well, we will rise until 10 o'clock. Would I be
expressing an opinion differing from anyone else
if I thought that there is no hope of finishing
Mrs. Trayner this week? Does anybody have any
different thoughts on that? What do you say to that,
Mr. Strathy?

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MR. STRATHY: Well, the only comment
I would like to make, Mr. Commissioner, is that as I
understand it we have Dr. Kauffman scheduled for
Wednesday of next week.

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THE COMMISSIONER: Yes, next Wednesday.

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MR. STRATHY: I think we, and I say
Mr. Thompson and myself and certainly the witness,
would like to see Mrs. Trayner's evidence finished
before Dr. Kauffman takes the stand and I would hate
to see us not sit this Friday only to find that we
can't finish Mrs. Trayner by Tuesday.

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THE COMMISSIONER: Well, I had
certainly thought that two days next week would be



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more than adequate but if it develops as we go along,
if there is any doubt about that, I will be happy to
sit on Friday. So, perhaps everybody had better not
make arrangements for any other frivolity on Friday
for the time being.

MR. STRATHY: Thank you.

THE COMMISSIONER: All right. Well
then, until 10 o'clock tomorrow morning.

--- Whereupon the hearing adjourned at 4:25 p.m.
until Wednesday, April 25th, 1984 at 10:00 a.m.

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